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ABSTRACT

This training manual presents a family-centered approach to early childhood special education and demonstrates how a family-centered approach to intervention is an extension of a child-centered approach. The manual offers a "hands on" approach to building relationships between professionals and families that lead to effective intervention. The training shows how establishing rapport with families can lead to understanding their point of view, which leads to Individualized Family Service Plans that are real and to strategies useful to the family. The trainer first models a collaborative partnership with the participants at a training site when the training goals are being developed. The trainer demonstrates listening and responding skills in interacting with the staff, which the staff will later use in their interactions with families. Sections of the training manual address: (1) developing the training (information gathering and sharing, and tailoring the training); (2) interpersonal communication skills (self-awareness and clarification of beliefs and values, understanding family variables through rapport building, listening and responding, and interviewing); (3) family-centered process (partnerships, collaboration, and goal attainment scaling); (4 understanding family variables (influence of beliefs and values, life events, family strengths, and self-awareness of teaching style); and (5) understanding the law and building a family-centered agency. (Contains 63 references.) (JDD)

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FAMILY-CENTERED APPROACH TO EARLY CHILDHOOD SPECIAL EDUCATION

PROJECT TA-KÓS
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PROJECT TA-KÓS FAMILY-CENTERED APPROACH TO EARLY CHILDHOOD SPECIAL EDUCATION

COMPONENT PURPOSE

- To present one perspective of a family-centered approach to early childhood service providers and parents

- To demonstrate how a family-centered approach to intervention is an extension of a child-centered approach.

> Based on a best practices review of the literature, Project Ta-kos endorses a family-centered approach to meet both the letter and intent of the PL 99-457.

RATIONALE: The following quote from Anderson (1985) serves as a rationale for this componet:

> The families are the only ones who see the child in all settings over time. They are the constant in the child's life ...

INTRODUCTION TO THE FAMILY-CENTERED APPROACH TO EARLY CHILDHOOD SPECIAL EDUCATION

This manual is written as a guide for facilitators who will be assisting agencies in implementing a **Family-centered Approach**. It was developed to accompany training by Project Ta-k6s (an HCEEP model demonstration grant) and was piloted with agencies serving children birth to three, public schools serving children in three and four year old programs, developmental kindergartens and Head Start programs.

The intent of PL 99-457 is to insure that intervention occurs in a manner that considers the total environment of the child with special needs. This will require the interventionist to work more closely with families than they may have in the past, to learn more about the families and to respond in new ways.

This unique training package demonstrates the process of gaining skills and expertise through first-hand experience. The reader will not find a simplistic step by step procedure for developing Individualized Family Service Plans. The reader will find a "hands on" approach that will enable professionals to build relationships with families that lead to effective intervention. The development of a relationship with families is also mandated by New Mexico's guidelines to the law which dictate the documentation of an agency's collaborative process with a family.

The training shows how establishing rapport with a family can lead to understanding their point of view. This understanding then leads to Individualized Family Service Plans that are real and to strategies that are useful to the family. The result of the collaboration is an effective partnership.

In training we believe the trainer can best teach by modeling and demonstrating the methods the trainees are expected to learn. Thus, the trainer first models a collaborative partnership with the participants at a training site when the training goals are being developed. The trainer demonstrates listening and responding skills in interacting with the staff which the staff will later use in their interactions with families.

Other fundamental assumptions underlie these materials. Demonstration is integral to our teaching methodology. For example, we believe that participants can best understand the value of learning interviewing and listening/responding skills when they experience being interviewed and listened to by the trainer or other group members.

We believe that professionals who want to adopt a family-centered approach in their intervention will need to learn more effective interviewing and listening skills. We also believe that in order to be able to listen or respond effectively to parents, professionals first need to become aware of their own beliefs and values. This will help professionals to "filter out" their own values as they try to understand clearly what families are saying.

These assumptions about the training process are reflected throughout our materials. We start with a section on building rapport which then leads to materials on listening, responding and interviewing and we arrive at our goal: the ability to build a partnership with parents as we plan interventions that are meaningful for their children and their family.

SECTION I DEVELOPING THE TRAINING

INFORMATION GATHERING AND SHARING WITH TRAINING SITE AND TAILORING THE TRAINING

GOAL: To create a 'goodness-of-fit' between this training component and the training site.

An informal setting such as breakfast or lunch with the site staff and parents sets the stage for an atmosphere of collaboration. Participants will discuss how they view their program in relation to a family-centered approach. The FACILITATOR will summarize the points made by the participants. Participants will prioritize, clarify, and negotiate training outcomes with facilitator.

SECTION II INTERPERSONAL COMMUNICATION SKILLS

SELF-AWARENESS AND CLARIFICATION OF BELIEFS AND VALUES

GOAL: To become aware of and clarify one's beliefs and values;
To develop an objective and nonjudgemental attitude toward diversity.

If professionals impose expectations, priorities, preferences, etc. on families, there is a risk of the family becoming helpless and dependent on the professional at the worst; at the least, families may discount the intervention strategies and advice all together. The facilitator will lead participants through some of the values clarification exercises, discuss handouts, and emphasize how difficult it is to see other families as 'functional' or 'appropriate' if they differ greatly in life-ways from their own.

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UNDERSTANDING FAMILY VARIABLES THROUGH RAPPORT BUILDING

GOAL: To reacquaint participants with the concept of rapport and to introduce a rapport continuum.

Because **rapport** is a culturally defined attitude, it is nearly impossible to describe and measure. It is that harmonious relationship that professionals are responsible for building with families. The facilitator will lead participants through the **rapport** continuum and have participants discuss the implications and roadblocks to building **rapport**.

LISTENING AND RESPONDING

GOAL: To learn **listening** and **responding** skills for the purpose of continued rapport building and for building a relationship.

Listening and **responding** skills are the mechanisms through which the family/professional relations remains dynamic. By virtue of being members of a helping profession, it is the early childhood professionals' job to learn **interpersonal skills** that facilitate and promote sharing, cooperation, and empowerment. The facilitator will discuss **empathic responding**, demonstrate **listening/responding** paradigms in a live interview situation, and have participants identify ways to keep **communication** open through an activity.

INTERVIEWING

GOAL: To learn culturally responsive techniques of **interviewing** which encourage parents to discuss their perspective of the child and family.

The field of anthropology has long utilized **interviewing techniques** that assure non-judgmental information gathering. Over time the techniques have been proven effective. By adapting these techniques, it is possible for early childhood interventionist to be certain that the perspective of the family member is unclouded by the perspective of the professional. The facilitator will explain **ethnographic interviewing** techniques and demonstrate this approach with a parent from the training site program. It is at this point in the training that participants will begin to apply **interpersonal communication skills** to the IFSP process, by being asked first to identify the strengths they hear during the **interview** and then to watch for priorities and possible outcome statements.

SECTION III FAMILY-CENTERED PROCESS

PARTNERSHIPS

GOAL: To understand how to establish a relationship with families based on mutual goals and expectations.

To develop a framework for information/role release between parents and professional that recognizes and appreciates the parent/professional roles in planning and decision-making for the child.

An effective partnership will assure that the child's program is stated and implemented in functional terms. There will be continuity of what's expected of the child's behavior. Partners will be able to express their needs, perspectives and preferences. The facilitator will discuss the essential features of a **partnership** and demonstrate the shifting balance of information sharing and decision making within a **partnership**. How the **collaboration** can result in parent satisfaction will be demonstrated through a technique called goal attainment scaling.

SECTION IV UNDERSTANDING FAMILY VARIABLES

SELF-AWARENESS:
THE ROOTS OF BELIEFS AND VALUES

GOAL: To recognize how beliefs and values shape everyday behavior.

The idiosyncratic characteristics of child and family are learned over time. These characteristics are usually out of personal awareness but influence every day activities and interactions. One way to recognization these differences is to be exposed to our own value orientations. The facilitator will lead a discussion about learned preferences based on participant completion of a values orientation instrument.

FAMILY STYLE AND STRENGTHS

GOAL: To become knowledgeable about aspects of family functional styles (life-ways), strengths and needs that families share.

By understanding a **family's style**, a service provider can work more closely with the family in order to assure "goodness of fit". Simeonson, et. al (1986) stated the following in regard to the "goodness-of-fit": "Application of the goodness-of-fit concept to the study of families in early intervention programs seems appropriate because the concept permits consideration of the unique idiosyncratic characteristics of child and family as they interact with the demands, expectations, and/or opportunities of the environment" (1986, p.83). The participants will complete one or more of the instruments that identify life events, family support, or family strengths. A discussion around the items on the instruments, their implications and thoughts about completing such instruments will follow.

SELF-AWARENESS and TEACHING STYLE

GOAL: To look at one's own teaching style and how it affects interactions with families.

In early childhood intervention the professional is asked to share expertise with families, allowing families to assimilate the knowledge into daily routines and everyday life. "The amount of autonomy exercised by the learner is congruent with that required by the mode or method used by the teacher" (Smith, 1982). How families receive and use information depends on how it is presented by the professional. The facilitator will lead a discussion on teaching styles based on teaching style inventories completed by participants.

SECTION V UNDERSTANDING THE LAW AND BUILDING A FAMILY-CENTERED AGENCY

THE INDIVIDUAL FAMILY SERVICE PLAN

GOAL: To give participants the opportunity to evaluate their own current materials from a family-centered perspective and to make any changes they think are warranted.

The intent of P.L. 99-457 is to assure that the participation of parents in the education of their children goes beyond the 'veto power' provided by P.L. 94-142. Current trends dictate an atmosphere of normalcy, where families with children with special needs are first viewed as normal families. Programs recognizing this intent will become more "family-centered" thus allowing family members to more fully participate in the goal setting in implementation process of their child's program. An overview will be presented of the **law and guidelines** for P.L. 99-457 and the intent of P.L. 99-457 as it recognizes the unique role families play in the development of their young child.

DEVELOPING A FAMILY-CENTERED PHILOSOPHY

GOAL: To determine and develop a family-centered philosophy.

"A philosophy provides a foundation for interpersonal relationships and actions for a program. It affects hiring practices, everyday communication and intervention, evaluation, monitoring, scheduling, and routines, plans for children and families. Without a philosophy, a program lacks coherence, adaptability and cohesion." (National Institute of Mental Health, 1987, p.9) Participants will be asked to identify and discuss a program's philosophy, whether written or unwritten.

COMPETENCIES

PARTICIPANTS CAN:

1) describe the salient characteristics of a family-centered approach, describe the intent of P.L. 99-457;
2) identify family strengths;
3) identify family preferences;
4) demonstrate knowledge of how a family uses support networks;
5) recognize the influence of beliefs and values on interpersonal relationships;
6) explain the rationale for considering a family's style while developing an IFSP;
7) describe the elements of collaboration;
8) demonstrate effective communication skills during a role-play with peers or a parent participant;
9) identify the elements of effective listening, responding, empathizing, and interviewing during a simulated interview;
10) demonstrate the principles of active listening and responding;
11) demonstrate the empathic response;
12) describe how to collaborate with a family to identify mutual outcomes and strategies to the family's satisfaction;

13) identify professional and family roles in an informed partnership;

14) demonstrate knowledge of how to help family access community resources;

15) identify and describe the implications of socio-cultural differences in parental expectations during the IFSP process;

16) describe how to formulate an intervention plan mutually with families and in accordance with a families beliefs, values and preferences;

17) demonstrate knowledge of how to apply family-centered principles to program decisions;

18) formulate an intervention plan in accordance with P.L. 99-457.

FACILITATOR GUIDE

HOW TO LEAD A GROUP

An effective facilitator leads the group in such a way that members feel they share common concerns. In an atmosphere of mutuality, group members feel accepted when they raise problems. They feel, too, a willingness to listen, empathize, and learn from other members of their group.

An effective facilitator recognizes that group members learn best from each other, particularly if the content relates to that which a member has used successfully. Most participants become willing to consider new ideas when they can release feelings about their own experiences.

At the start of the workshop, participants may hesitate to share personal feelings and experiences. Facilitators can reduce some of the group's tenseness with appropriate humor and a relaxed attitude. They can help relax the group also by describing common difficulties of child-rearing or personal experiences.

If you believe that it's more important to be an effective listener and facilitator than it is to have a precisely correct answer, you will realize that you need not be the expert in order to facilitate this workshop.

PRINCIPLES OF LEADERSHIP

Facilitators bring their personal beliefs and values to the group. They are effective group leaders who conduct workshops according to the following principles:

1. Leaders are sensitive to the potentially encouraging forces in a group and lead the group in a way which promotes cooperation and cohesiveness.

2. Leaders believe in the ability of people to grow and change. Leaders are not involved in gratifying themselves, but in encouraging the growth of group members.

3. Leaders provide experiences which allow group members to recognize their own assets. They avoid the role of expert or authority.

4. Leaders are concerned with developing an atmosphere of mutual trust and encouragement among group members.

Effective leaders will not possess all these desirable traits - no one does. But they will not be discouraged by their imperfections, either. They will proceed as well as they can, alert to ways they can improve.

SIX FACILITATOR SKILLS

The following skills of leadership can help each discussion be productive:

1. **Structuring** sets the purpose and goals of the group and the procedures of the workshop.

This workshop is not merely open discussion.

Structuring requires the leader to be continuously aware of what is happening and to determine whether it is within the purposes of the group. The leader who structures well senses when it is appropriate to permit latitude in discussions and when it is prudent to draw boundaries.

2. **Universalizing** is the process whereby a leader helps group members become aware that their questions and concerns are shared by others.

If the members are to work together and to feel concern for each other, they must learn to listen to each other and discover that their concerns are not unique, but often common experiences.

Group cohesion is promoted by a simple strategy: the leader's asking what others think about a presented problem. After hearing a question or a puzzled comment, the facilitator may ask, "Has anyone else wondered about that? Has anyone else had difficulty trying to . . .? " As responses come forth, listeners recognize they are not isolated in their feelings, questions or concerns.

3. **Linking** is the identification of common elements. It is a skill which requires a leader to listen carefully to the questions and comments expressed in the group.

As thoughts and feelings are expressed, listen for themes which are similar - but which may not have been recognized as such by other group members. Linking clarifies communication by helping members see that they have similar feelings or beliefs. Point out similarities or differences; for example, "Mary, who works for the public schools, gets very discouraged when she tries to budget time for teachers and therapists to meet with other program's staff about children moving into public school. Do you remember what Linda, from the community-based early intervention program, said about the number of hours that staff have to volunteer to meet with public school staff? Do you see any similarity between the two issues?

4. **Feedback** is the process whereby a person gets reactions from members of the group concerning what he or she has just said or done. Feedback enables a person to understand how she or he is being perceived by others.

The effective leader recognizes the value of feedback, points out its function in the group, and shows how it works by "feeding back" information to group members and clarifying what has happened. Saying to a member, "Your tone of voice sounds like you're angry and your description of Bobby's classroom makes me think your very dissatisfied - is that what you feel?"

Feedback does not demand a change; it only shares an observation. It must be done in a spirit of mutual respect and caring. Any decision to change rests with the receiver.

5. **Focusing on the positive** actions of people gives members encouragement and leads them to encourage each other. Encouragement is a necessary skill for a parent; therefore, it should be practiced in the group.

6. **Summarizing** helps members to understand ideas, procedures, and attitudes that have been expressed and to integrate what they have learned. The summary is verbal, not written, so all may benefit from the exchange.

A summary may deal with the content of the meeting, the feelings of members, or with the level of their involvement. Group members can be asked to summarize at appropriate times. The facilitator needn't wait until the end of the workshop to help clarify the outcomes of the workshop.

ANSWERING QUESTIONS

A question comes up. It's directed to the facilitator. What does the facilitator do?

First, get other group members to think about the question. To the group, say something such as, "What do you think about that? How would you have handled that?" By doing so, you will tap the wisdom of the group and "universalize" the problem posed by the question.

Redirecting a question not only stimulates, involves, and brings the group together; it also demonstrates a facilitator's faith and belief in people's ability to find their own answers.

The difference between effective and ineffective helpers lies in their basic beliefs about people. Effective helpers believe that:

> People are able, not unable. They have the capacity to solve their problems.
>
> People are friendly, not unfriendly. They expect a reciprocal relationship.
>
> People are worthy, not unworthy. They possess dignity which must be respected.

People are basically internally, not externally, motivated. They are creative and motivated from within.

People are dependable, not hindering. They are sources of satisfaction and enhancement.

A facilitator must genuinely hold these beliefs about people if the facilitator expects to encourage psychological growth. It is impossible to "sell" a democratic approach if one is authoritative and displays a lack of trust or acceptance in group meetings.

An effective facilitator must also project an impression of self-confidence. This rests upon a belief that one is adequate to meet the responsibilities and challenges of life. It comes from knowing that one is acceptable, likable, and able to bring about a positive response from people. A feeling of personal adequacy allows one to feel that sense of self-esteem which comes from being identified with others rather than alienated from them.

A feeling of personal adequacy also gives a facilitator something else - the courage to be imperfect. For this workshop, you do not have to feel that you must handle each situation perfectly. Because you believe in yourself, you are free to believe in others and in the power of the group.

A COMMON PROBLEM FOR THE FACILITATOR

Even experienced group facilitators encounter difficulties. Many of these problems can be traced to a common denominator: the participant who resists - knowingly or unknowingly - what the rest of the group is trying to accomplish.

Communicating honestly and directly is not easy. When we feel unsure of ourselves, we may defend ourselves by "playing games."

People who play "Monopoly" believe they must be the center of attention. They become concerned whenever they are not the focus of discussion. These people have a number of purposes for monopolizing a group. Aside from enjoying the attention of other members, they develop strategies for controlling and contesting the position of the leader.

To lessen the influence of a monopolizer, you might say "I'm getting concerned that time is going fast and we need to move on to other things. If there's time later, we can come back to this." Then move on.

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PREPARATION FOR TRAINING

FORMAT

This manual is divided into five sections. For each section, the person(s) who will act as workshop FACILITATOR(S) will find a step-by-step guide, in objective format, to conduct training. A page called "What You Need" listing training materials and resources prefaces each section. A Training Materials Table of Contents listing the Handouts, Overheads and Background Materials follows each "What You Need" page. Training Materials includes:

- document originals for making handouts
- document originals for making overheads
- background information for the facilitator
- additional materials

Please read each section carefully. Some workshops require the FACILITATOR(S) to gather specific items ahead of time. Others require some materials to be mailed prior to the workshop. Arrangements for demonstrations and activities may require advance telephone contact with parents or staff members.

TRAINING SEQUENCE

The training components should be delivered through didactic training and on-site experiential training. Activities for skill acquisition, skill retention and self-monitoring are included throughout the component.

Section I is completed prior to training. Sections II, III, and IV build on one another and when completed, will provide participants with the information and tools necessary to conduct family-centered intervention. Section V provides specific training regarding the IFSP and an opportunity for participants to expand or apply their knowledge.

The amount of time required for each unit depends on the experience of the agency, amount of discussion acceptable to the FACILITATOR(S) and to the number of additional activities used. Approximate times are as follows:

SECTION I -	DEVELOPING THE TRAINING	2 TO 3 HOURS
SECTION II -	INTERPERSONAL COMMUNICATION	6 TO 9 HOURS
SECTION III -	FAMILY-CENTERED PROCESS	2 TO 3 HOURS
SECTION IV -	UNDERSTANDING FAMILY VARIABLES	3 TO 6 HOURS
SECTION V -	UNDERSTANDING THE LAW, AND BUILDING A FAMILY-CENTERED AGENCY	4 TO 8 HOURS

FACILITATOR NOTES:

The text of the Objectives uses both he and she pronouns alternately. Our attempt is to avoid the awkward use of "s/he," "him/her" or "him and her."

The term FACILITATOR appears as singular throughout the manual. Most likely, one person would lead activities listed in each objective or set of objectives, however, we suggest that more than one person conduct each workshop.

It is very important that each FACILITATOR have knowledge of the agency and local community where the training will take place. Agency priorities and community make-up will affect the training content. Our training offers recommendations for ways parents and professionals can work together.

SOLICITING PARENT PARTICIPATION

A Family-Centered Approach is all-encompassing in that families (or parents) are invited to participate at all levels of their child's program to the extent that they want to become involved. This requires extending an open invitation to parents.

Recruiting Parents for Demonstration

The success of the Family-Centered training is greatly enhanced when parents participate in role-play and demonstration. Not all parents who attend the training will want to be this active, but a few enjoy the opportunity to tell their story to a group. Listed below are some ideas for recruiting parents:

1. Discuss parent participation with the training site.
    - Identify the most appropriate way to extend the invitation for parent participation (mail, flyer posted, phone, personal contact).
    - Decide the best way to make parents feel welcome but not obligated.
2. Identify possible parents for role-play/demonstration with training site.
    - Decide who will make initial contact with parents.
    - Contact interested parents to explain expectations, etc.
    - NOTE: The training site may prefer that a notice regarding recruitment be included in their parent newsletter, bulletin, or by direct mail.

3. Other ways to recruit parents.

   - Contact parents whose children have "graduated".
   - Contact local parent support groups.
   - Ask parents at training site for other names.
   - Offer parents compensation for their time, for example, childcare, lunch, certificate, newsletter recognition, etc.

The assumption is made that parents will be available for role-play and demonstration. However, willing staff members can take on this role if parents are not available.

SUGGESTIONS FOR BUILDING RELATIONSHIPS WITH STAFF/FAMILY

- Spend time in classroom.
- Make contact with all staff members.
- Send newsletter, flyer, or brochure about training.
- Attend PTA/PTO or parent organization meetings if appropriate.
- Ask staff and family about their program; what they do.
- Profile the community (Ford & Westby, 1990); read local newspapers.
- Observe staff activity to become familiar with staff interests, agency structure and routines.
- Have meals before or during training with all participants.
- Ask potential participants what they expect from the initial training and follow through.
- Learn and use each participant's name immediately.

SECTION I:

DEVELOPING THE TRAINING

- Information Gathering and Sharing
- Tailoring The Training

INFORMATION GATHERING AND SHARING WITH TRAINING SITE

WHAT YOU NEED:

INTRODUCTION

Handouts:

Collaborative Process for Training Sites
Content Areas
Priority Areas

Equipment:

Easel

Materials:

Flip chart
Markers

Supplemental Materials:

Sample training sequence for site one
Sample training sequence for site two
Sample letter

INFORMATION GATHERING AND SHARING
TAILORING THE TRAINING

GOAL: To create a "goodness-of-fit" (Thomas & Chess, 1977) between this training component and the training site.

RATIONALE: This is the same rationale that would be used with families: staff members become more invested in the overall outcome if inservice plans are jointly created.

NOTE: An informal setting such as breakfast or lunch with the site staff and parents sets the stage for an atmosphere of collaboration.

OBJECTIVE 1

To identify expectations regarding family-centered training.

Participants will discuss how they view their program in relation to a family-centered approach. The FACILITATOR asks the participants to answer the following questions during a round-table discussion and record their responses for purposes of making adjustments in the training as necessary:

1. Ask a broad general question related to the way they currently deliver services. For example: How do you currently deliver services?
2. What do you think a family-centered approach encompasses?
3. What are your expectations for training in a family-centered approach?

Note: The material generated during this discussion may serve as a basis for the development or revision of the training site's philosophy and mission statements. (See section on Building a Family-Centered Agency.)

POINT: **It should be emphasized that programs and schools have the option of adopting all or part of the suggestions for a family-centered aproach as developed by Project Ta-kos and no pressure should be brought to bear regarding change of the program.**

The FACILITATOR lists all expectations on a large sheet of paper; eliminate any expectations that will not be directly addressed (For example, the training site may have arranged for another trainer to cover certain content.)

OBJECTIVE 2

To discuss the relevancy of Project Ta-kós training content.

The FACILITATOR summarizes the points made by the participants as they answered the questions in **OBJECTIVE 1**. A discussion centers around how Project Ta-kos training content will be relevant to their expectations. Give the **HANDOUT: Content Areas** of the possible topic areas.

POINT: It is important during any training to make the participants feel good about the work they are doing. Use key points from the discussion generated during **OBJECTIVE 1** to reinforce the staff's current knowledge about a family-centered approach.

OBJECTIVE 3

To prioritize, clarify, and negotiate training outcomes with the FACILITATOR.

Give the **HANDOUT: Outcomes for priority areas sheet**, the **HANDOUT: "Collaborative Process"** and explain the following:

An Action Plan can include:

1. Phase I, Phase II, Phase III
   PHASE I refers to didactic inservice training; **PHASE II** refers to on-site, field-based consultation and/or training; **PHASE III** refers to support provided so that continued adaptations of the training content can be made more relevant to each site. (See background materials for sample training sequences.)

2. Identification of outside/inside sources
3. Materials/information provided on site or by mail

OBJECTIVE 4

To familiarize the FACILITATOR with agency practices.

The FACILITATOR visits all classrooms, as appropriate at the site. During the talk with staff and parents.

POINT: A visit is made to the program to become familiar with the structure, routines, staff and parents. This purpose should be made clear to everyone.

A personalized letter explaining the purpose of the FACILITATOR'(S) visit should be sent to ALL staff members prior to the visit. See background materials for a sample.

TRAINING MATERIALS

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Content Areas 26
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Supplemental Materials:

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Sample Training Sequence For Site Two 33
Sample Letter 38

SECTION I:

DEVELOPING THE TRAINING

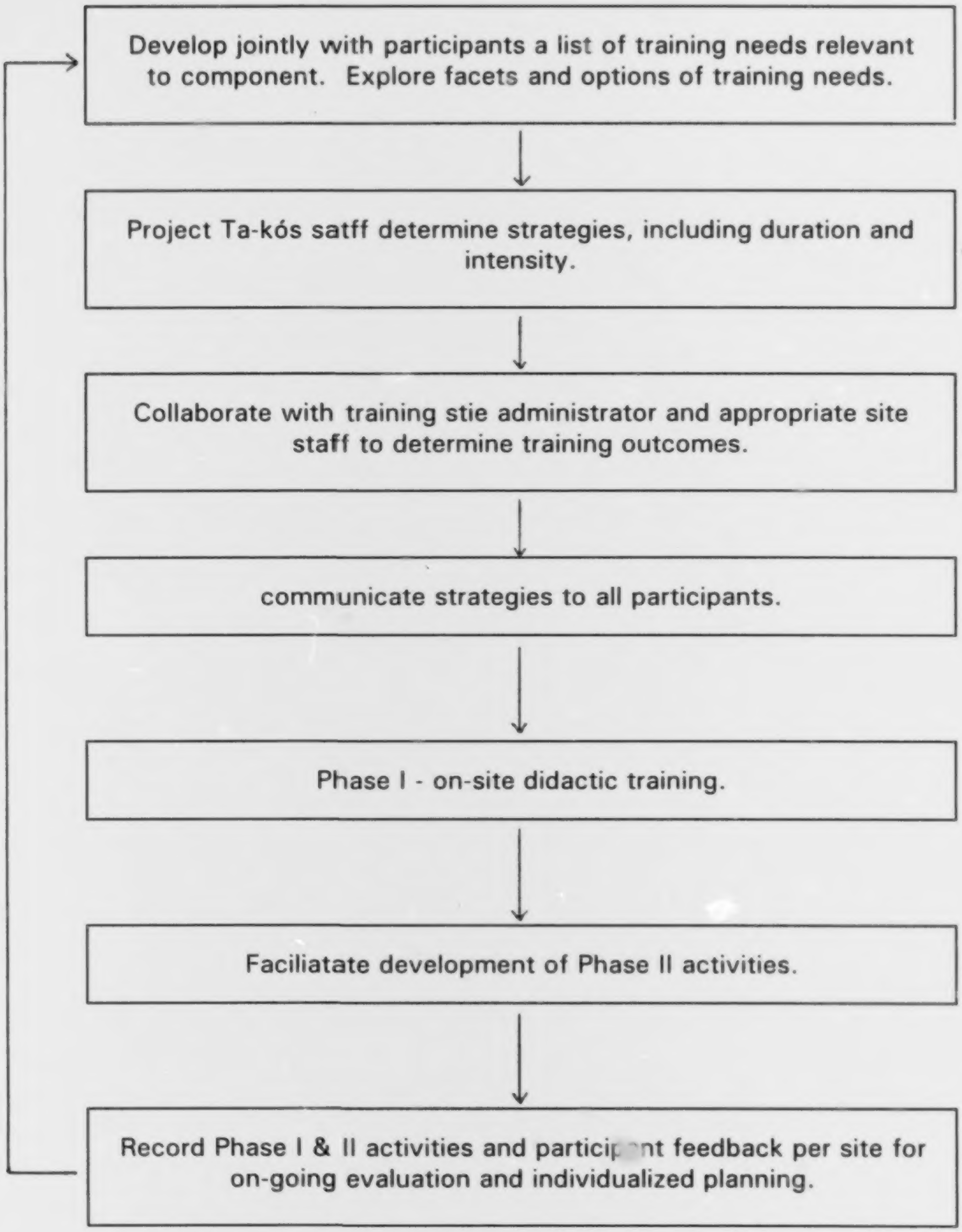
* Information Gathering and Sharing

* Tailoring The Training

Handouts:

Collaborative Process For Training Sites
Content Areas
Outcomes For...

COLLABORATIVE PROCESS FOR TRAINING SITES


Develop jointly with participants a list of training needs relevant to component. Explore facets and options of training needs.
Project Ta-kós satff determine strategies, including duration and intensity.
Collaborate with training stie administrator and appropriate site staff to determine training outcomes.
communicate strategies to all participants.
Phase I - on-site didactic training.
Faciliatate development of Phase II activities.
Record Phase I & II activities and participant feedback per site for on-going evaluation and individualized planning.

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FAMILY-CENTERED APPROACH

Content Areas

	Topic	Orientation and Skills
I.	Developing The Training	Information Gathering and Sharing Tailoring The Training
II.	Interpersonal Communication Skills	Self-Awareness: Beliefs and Values Rapport Listening/Responding Skills Interviewing Skills
III.	Family-Centered Process	Partnerships Collaboration Goal Attainment Scale
IV.	Understanding Family Variables	Self-Awareness - Adult Learning Styles Family Style a. Strengths & Needs Survey b. Life Events. c. Family Social Support Self-Awareness - Teaching Styles
V.	Understanding the Law and Building a Family-Centered Agency	IFSP and Intent of P.L. 99-457 Building a Family-Centered Philosophy

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OUTCOMES FOR...

DATE ______________

FACILITATOR ____________________

TRAINING SITE ___________________

Priority Areas	Action Plan

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SECTION I:

DEVELOPING THE TRAINING

- Information Gathering and Sharing
- Tailoring The Training

Supplemental Materials:

Sample Training Sequence for Site One
Sample Training Sequence for Site Two

SAMPLE TRAINING SEQUENCE FOR SITE ONE

FAMILY-CENTERED APPROACH TO EARLY INTERVENTION

Agendas for Phase I and Phase II

(example includes evening Parent Workshop on **Networking:**

Parents, Friends, and Professionals)

AGENDA FOR EARLY CHILDHOOD PROGRAM

September 28 12:00 - 4:00

12:00	Lunch Meeting - Discussion Project Ta-kós/Early Childhood Program Goals and Expectations of Training
1:00	Break
1:45	Adult Learning Styles
2:30	Self-Awareness: Beliefs and Values
3:15	Rapport
3:50	Summary/Assignments

September 28 6:30 - 8:00

"Networking: Parents, Friends, and Professionals"
A Workshop and Dinner for Parents

September 29 9:30 - 11:30

Project Ta-kós to visit to classrooms

AGENDA FOR
EARLY CHILDHOOD PROGRAM

OCTOBER 9, 1989

1:00	Introduction - Birth of a Child
1:30	Empathy and the Listening Paradigm - Mini-lecture and Demonstration
2:00	Break
2:15	Responding and Empowerment - Demonstration
3:00	Interpersonal Techniques for Communicating
3:45	Summary/Assignment

OCTOBER 10, 1989

8:30	The Roots of Beliefs and Values
9:15	Interviewing - Mini-Lecture and Demonstration
10:00	Break
10:15	Survey of Family Needs - Demonstration
11:00	Partnerships - Mini-Lecture Intent of P. L. 99-457 - Mini-Lecture
11:30	Lunch
1:00	Life Events/Family Functional Style
1:30	Objectives and Strategies - Demonstration
2:15	Break
2:30	Collaboration/The Goal Attainment Scale - Demonstration
3:45	Summary

AGENDA FOR EARLY CHILDHOOD PROGRAM

March 1	9:00 - 1:00
9:30	A Review of Listening/Responding
	Demonstration and Activity of Active and Passive Listening to reach Outcome Statements (Simulated Interview #1 and #2)
10:15	Practice of Listening/Responding
	A role-play activity using the Self-peer checklist
10:40	Break
11:00	A Review and Practice of Interviewing
	A demonstration and practice of interviewing strategies (Simulated Interview #6 and #7)
12:00	Evaluation, Discussion and Pizza

We have enjoyed our time with you. You have given us a place to share, and feedback to strengthen our components. You truly care about the families you work with and this is what has make our "training" successful. We thank you for participating. We hope that we can return to visit next year.

SAMPLE TRAINING SEQUENCE FOR SITE TWO

FAMILY-CENTERED APPROACH TO EARLY INTERVENTION

Sample Agendas for Phase I and Phase II

AGENDA FOR DEVELOPING THE TRAINING

October 5, 1989 11:45 - 4:00

11:45	Lunch Meeting - Introduction to Project Ta-kós and Family-Centered Training
1:15	Goals and Expectations
1:45	Break
2:00	Self Awareness: Beliefs and Values Introduction
2:45	Training Priorities
3:15	Introduction to Rapport

October 6, I989

9:00 - 11:00	Visit to Classrooms

AGENDA FOR EARLY CHILDHOOD PROGRAM

NOVEMBER 21, 1989

8:30	Introduction - Adult Learning Styles
9:00	Empathy and the Listening Paradigm - Mini-lecture and Demonstration
10:00	Break
10:15	Responding and Empowerment - Demonstration
11:00	Interviewing - Mini-lecture and Demonstration
11:45	**LUNCH**
1:00	The Roots of Beliefs and Values
1:30	Survey of Family Needs - Demonstration
	Partnerships - Mini-lecture
2:00	Break
2:15	Intent of P. L. 99-457 - Mini-lecture
3:00	Collaboration/The Goal Attainment Scale - Demonstration
3:45	Summary

AGENDA FOR EARLY CHILDHOOD PROGRAM

JANUARY 26, 1990

9:00	Services and Program Descriptions - Small group activity
	Instructions - select a recorder list points of discussion on cards
	Domains of services - Small group activity
	Instructions - identify categories of services from list put appropriate components under each category
	Discussion - Large group
10:15	**Break**
10:30	Family Events - Lecture and Discussion
11:30	**Lunch**
1:00	Family and Child Centered Approaches: a Q - sort activity
1:45	**Break**
2:00	Principles and practice in Roswell - small group activity
3:15	Summary

AGENDA FOR INDEPENDENT PUBLIC SCHOOLS

OCTOBER 5, 1989

1:00	Introduction - Adult Learning Styles Birth of a Child
1:30	Empathy and the Listening Paradigm - Mini-lecture and Demonstration
2:00	Break
2:15	Responding and Empowerment - Demonstration
3:00	Introduction to Interviewing Techniques
3:45	Summary

OCTOBER 6, 1989

8:30	The Roots of Beliefs and Values
9:00	Interviewing - Mini-lecture and Demonstration
9:30	Survey of Family Needs - Demonstration
10:15	Break
10:30	Partnerships - Mini-lecture Intent of P. L. 99-457 - Mini-lecture
11:30	Lunch
1:00	Collaboration/The Goal Attainment Scale - Demonstration
2:30	Break
2:45	Philosophy
3:45	Summary

September 19, 1989

Dear Staff Member,

We hope you've heard that the Project Ta-kós staff are coming to train on the Family-Centered Approach and visit your program. We are scheduled to meet you for lunch on September 28, followed by the beginning of our training until 4:00 p.m. We will return for the remainder of the didactic training on October 9, from 1:00 p.m. to 4:00 p.m. and October 10, from 8:30 a.m. to 4:00 p.m. Parents are invited and encouraged to attend all training.

We would also like to visit your classrooms to get to know you and the children. Unless we hear from you, we are scheduled to visit on September 29, in the morning. In addition, we will be providing a workshop called, "Family Networking: Linking Family, Friends, and Professionals," for parents on September 28. All parents and staff are invited to attend.

Information about Project Ta-kós is included. If you have any questions, we can be reached at our new phone number 842-9948.
Please note our new address:
P.O. Box 7040
Albuquerque, New Mexico 87194-7040

Sincerely,

Linda Askew
Bobbye Krehbiel

SECTION II:

INTERPERSONAL COMMUNICATION SKILLS

* Self-Awareness: Beliefs and Values

* Rapport

* Listening/Responding Skills

* Interviewing Skills

INTERPERSONAL COMMUNICATION SKILLS

WHAT YOU NEED:

INTRODUCTION

Handouts:

Clarifying Beliefs and Values
Birth of A Child (Family Living Inventory; Luera, M.; 1990)
Rapport
A Model of Rapport
Empathetic Responding Guidelines for Leaders
Interpersonal Techniques for Communication with Families
Principles for Positive donor-Recipient Exchanges (Dunst & Trivette; 1986)
Simulated Interviews
Self-Peer Checklist
What are Good Questions
The Basics of Quality Interviewing
Guidelines for Communication

Send the following prior to the workshop:
The Dirty House (Lentz, J. & Meyer, E.; 1979)

Overheads:

The More We
Building Rapport
We Should Be
CONS
Interviewing
Grand Tour

Equipment:

Overhead Projector

Materials:

Flip chart
Markers

***Supplemental Materials*:**

Clarifying Beliefs and Values
Values Clarification for Professional (Davis, J.; 1981)
IFSP: Clarifying Our Values
Values Clarification
Person-to-Person Contact: Listening (Krehbiel, R.; 1987)
Types of Responding (A summary of Gateways and Barriers to Communication); (Rogers, C., & Roethisberger; 1952)
Yourself as a Vehicle of Communication (Egan, G.; 1982)
Interviewing Concept (Bailey, D.B.; 1988)
Sample letter

SELF-AWARENESS AND CLARIFICATION OF BELIEFS AND VALUES

GOAL: To become aware of and clarify one's beliefs and values.

To develop an objective and nonjudgmental attitude toward diversity.

RATIONALE:

> "I believe the more we know ourselves, the better we can understand, evaluate, and control our behavior and the better we can understand and appreciate the behavior of others. I am suggesting that our necessary presence need not be an encumbrance, that we need not be preoccupied with ourselves, but can concentrate wholeheartedly on the (parent)."
>
> Benjamin

OBJECTIVE 1

To participate in values clarification activities.

MINI-LECTURE and ACTIVITY

The FACILITATOR displays **OVERHEAD: THE MORE WE . . .** and discuss the overhead and the rationale for the Self-Awareness and Clarification of Beliefs and Values Section (see previous page).

Next, the FACILITATOR should take the participants through some of the **values clarification** exercises found in the supplemental materials section, or create these types of exercises relevant to the community, age of the participants, etc.

NOTE: The **values clarification** activities represent a range of topics. The FACILITATOR should select **values clarification** activities based on the familiarity and cohesiveness of the training group and the amount of rapport the facilitator and participants establish. This information is obtained during the round table discussion and visits to the site (see section "Information Gathering and Sharing").

POINT: "It's hard to be unbiased when you don't know what your biases are... Check out your bias system..."

Patty McGill-Smith; ACCH National Conference; 1989; Anaheim, Calif.

OBJECTIVE 2

To recognize one's beliefs and values affects interpersonal relationships.

The FACILITATOR gives the following **INTRODUCTION** to beliefs and values:

If professionals impose expectations, priorities, preferences, etc. on families, there is a risk of the family becoming helpless and dependent on the professional, at the worst; at the least, families may discount the intervention strategies and advice all together.

BELIEFS are said to be what people hold to be truths.

VALUES are the priorities put on those **beliefs**.

For example, many people believe that exercise is healthy and can prolong life. However, the priority each individual puts on exercise varies greatly.

The FACILITATOR asks the participants to discuss the following questions:

1. Why should one's **beliefs** and **values** be clarified and recognized?
2. How does this information (knowing about one's **beliefs** and **values**) relate to working with families and other professionals?

POINT: Viewing people as healthy or unhealthy, functional or dysfunctional, affects the professional/parental relationship. This is because there is a tendency to judge people based on one's own **beliefs and values**. It is difficult to see other families as "functional" or "appropriate" if they differ greatly in life-ways from our own.

NOTE: The **HANDOUT: Clarifying Beliefs and Values** is particularly useful in helping participants understand the relationship of **beliefs and values** to each other and to our interactions with others.

OBJECTIVE 3

To recognize the role culture plays in each individual life/family.

ACTIVITY

Give participants the **HANDOUT: Birth of a Child** (from Luera, M., The Family Living Inventory, 1990 - for complete inventory see references). Generate a discussion in which the audience shares memories (Include yourself).

NOTE: Point out the parallels across stories. Explain that the birth of a child is a unique experience for each family but that some traditions are handed down or borrowed from relatives, friends, or other cultures. Some may be elaborate, others simple but all contribute to the families definition of "culture." If the group is homogeneous in their comments and "stories" then the FACILITATOR should discuss examples given from other people. Examples maybe obtained from previous workshops.

OBJECTIVE 4

To recognize how personal values influences acceptance of and interaction with others.

MINI-LECTURE

Prior to training, send participants **HANDOUT**: **"The Dirty House"** (Lentz, J. Z. & Meyer, E., l979). Discuss this article as it relates to **Beliefs** and **Values**. (We wish to acknowledge Susanne Hayes, MS, RN, CRRN, Nurse Specialist in Albuquerque, N.M. for providing us the article.)

OBJECTIVE 5 - OPTIONAL

To become aware of one's own cultural life- ways.

The FACILITATOR may want to train Project Ta-kós Component titled **"Understanding Family Uniqueness Through Cultural Diversity"** (See References for Luera, M., 1990). This should be arranged with the staff in advance of the training, as it would take an additional 2 days of on-site training.

UNDERSTANDING FAMILY VARIABLES THROUGH RAPPORT BUILDING

GOAL: to reacquaint participants with the concept of **rapport** and to introduce a **rapport continuum**.

RATIONALE: **Rapport** is the:

> "...illusive butterfly that flutters around all comfortable interactions between parents and professionals. It is that harmonious relationship that professionals are responsible for building with parents. It is the mutual feeling of trust and understanding but may not necessarily be a deep, long-lasting friendship" (Krehbiel, 1998).

NOTE: The information in this section is based on personal communication with Carol Westby, Ph.D. Dr. Westby has integrated concepts form the field of anthropology into early childhood education. For more information, see Westby, C.E; 1990, Ethnographic interviewing; Asking the right questions to the right people in the right ways. Journal of childhood communication disorders.

OBJECTIVE 1

To discuss the tools for building **RAPPORT**.

The FACILITATOR discusses the rationale for **rapport**. Tell participants that: Because **rapport** is a culturally defined attitude, it is nearly impossible to describe and measure.

Next, move to a discussion on **building rapport**.

POINT: **RAPPORT** is an ongoing process that varies from day to day. It is especially critical for professionals to think about building **RAPPORT** during the first contact with parents.

Display **OVERHEAD: Building Rapport** and give **HANDOUT: Rapport.** Tell participants that some tips for professionals to condiser when building **RAPPORT** include:

* Be attentive when parents are speaking; demonstrate interest through body language and carefully worded questions.
* Be observant of feelings, beliefs, and values (your own as well as others).
* Adapt to the parents' pace and verbal expression.
* Reflect feelings.
* Be aware of humor and use it appropriately
* Keep questions at a minimum at first.
* Be prepared to answer parental questions openly.
* Suspend judgement.
* Assure parents of confidentiality.
* Be patient.

OBJECTIVE 2

To understand the **RAPPORT CONTINUUM** and its relationship to interpersonal communications.

Give the **HANDOUT: A Model of Rapport** and display the **OVERHEAD: The Rapport Continuum**. Discuss the points of the model fo **rapport**.

POINT: The contiuum is not necessarily linear. People may move backwards or forwards depending on factors outside of the relationship. For example, a parent may have a negtative encounter with a pediatrician or other professional regarding their child, causing her to reevaluate her realtionship with all professionals. You may find that this parent is **apprehensive** at your next visit when you thought your relationship had moved beyond this stage.

Ask participants to discuss the implications of the shifting back and forth between **apprehension, exploration, cooperation, and participation** when attempting to determine a family's priorities.

OBJECTIVE 3

To discuss the roadblocks to **RAPPORT**.

The FACILITATOR discuss roadblocks to **RAPPORT**. Ask participants to consider the following questions if rapport isn't happening with a certain family.

Ask yourself and others:

"Why? What is going on?"
Are values and beliefs a factor?
Are you going at a faster or slower pace than the parents feel comfortable with?
Where are the parents in terms of readiness levels?
Where are the parents in terms of the grieving process?

1) How can choose an item from the list above turn into a roadblock? (NOTE: Sense of humor might bring an interesting discussion: when do you laugh?; at what?)

2) How can beliefs and values be roadblocks to **RAPPORT**?

POINT: It's not until you get to know someone well that you become aware of her true beliefs and values. It may take a specific situation for differences or congruences to become salient.

INTERPERSONAL COMMUNICATION SKILLS

GOAL: To learn **listening** and **responding** skills for the purpose of continued rapport and relationship building.

RATIONALE:

1. **Listening** and **responding** skills are the mechanisms through which the parent/professional relationship remains dynamic.

2. By virtue of being members of a helping profession, it is the early childhood professional's job to learn **interpersonal skills** that facilitate and promote sharing, cooperation, and empowerment.

OBJECTIVE 1

To understand the difference between **empathy** and **sympathy** and to discuss guidelines for **Empathic Responding.**

The FACILITATOR gives the following mini-lecture as an introduction to **Empathy**.

Sympathy vs. Empathy

Sympathy means entering into another person's mental state. It refers to having an agreement or sameness of feeling with someone. When you're in **sympathy** with another person, you have the same feeling he does.

In contrast, **empathy** has to do with getting yourself into another person's place so you can understand him better. Through **empathy**, you can understand another person's feelings without having those feelings yourself.

Give participants the **HANDOUT: Empathetic Responding**. . . and discuss it's points.

What are possible **empathetic** responses to the following situations:

1. A dad telling you about problems with his child care arrangement; or
2. A mom tells you about the hassles she's had trying to locate her child's medical records.

OBJECTIVE 2

Listening. To observe a Demonstration of **Passive** and **Active**

The FACILITATOR demonstrates the paradigms regarding **passive** and **active listening** (See Background Materials for more information). This paradigm was first described by Roger Kroth in 1972 and is a good beginning for skill building in **active listening** and **responding.** Ask the participants for a volunteer who will attempt to tell the FACILITATOR about a summer vacation, trip, or any recent event. Tell the volunteer to continue talking as long as possible or until the FACILITATOR stops the demonstration. The FACILATOR should demonstrate several of the paradigms, stopping after each one. The participants can be asked to guess which example the FACILITATOR is demonstrating. The volunteer can describe how each experience felt.

POINT: The quality of **listening** is important. We must **"listen for"** feelings as well as content. We need to **"listen for"** gestures and attitudes.

OBJECTIVE 3

To observe and respond to an interview demonstrating **active/passive listening, observation, empathy, supporting behavior, etc.**

Ask the participants to observe a live interview between a parent and the FACILITATOR. (FACILITATOR begins a visit with the parent whom he has never met. The FACILITATOR attempts to demonstrate **active/passive listening, observation, empathy, supporting behavior,** etc.) At a comfortable time, stop and ask the participants the following questions:

1. What **passive listening** behavior did you observe? Why is body language important? (See Background Materials for additional information).
2. What types of **responses** can you identify?
3. What empathic responses did you hear?

POINT: **Listening and Responding** actively is hard work. It requires conscious effort, concentration, patience, and practice.

OBJECTIVE 4

To experience giving an **empathic response** with peers.

ACTIVITY

An assignment during break time:

"Two people who don't know each other very well should begin a conversation. One should bring up a problem or concern. The other should empathize without giving advice."

When break is over, discuss the difficulty in not giving advice.

NOTE: OBJECTIVES 5 and 6 are designed to allow participants to fine tune **active listening** and **active responding** skills.

OBJECTIVE 5

The FACILITATOR gives a mini-lecture on the Types of Responses (Rogers, 1952) provided in the background materials of this section. Ask participants to discuss the effectiveness of these responses. Have participants get into dyads and take turns practicing the responses. They may use any topic of their choice. After an appropriate amount of time stop the activity and have the group discuss the experience.

OBJECTIVE 6

To discuss several **Interpersonal Techniques for Comunicating with Families.**

Give the **HANDOUT**: **Interpersonal Techniques for Communicating with Families**. Pick several to discuss. For Example:

The FACILITATOR to member of audience: "I had the coldest experience when I walked into that place. Those people were so cold."

Ask audience to seek clarification here (use #16 on the handout). The FACILITATOR might say, "They didn't smile or talk friendly or act like they even knew I was there." Ask audience to ask for a comparison (use #10 on the handout).

POINT: The objective in **active listening/active responding** is to keep the conversation open.

NOTE: OBJECTIVES 7 and 8 focus on **enabling** and **empowering** as communication skills.

OBJECTIVE 7

To discuss assumptions regarding the concepts of **Enabling and Empowering.**

NOTE: The term enabling is used in the positive context of the meaning "to make possible."

The FACILITATOR asks participants to think about times in their lives that required them to make significant decisions. For example:

1. going to the high school counselor to get advice about electives to take;
2. buying a car
3. choosing your occupation (making decisions about what to major in college or how to select a possible adult role);
4. choosing a preschool for your child
5. thinking of others or ask participants for examples.

The FACILITATOR should then ask:

What do you need to make decisions?

How do you get information?

How do you prioritize your information?

Who do you rely on and why?

As a last question ask:

Who is responsible for making the final decision and why?

After an appropriate amount of time stop the discussion and begin a mini-lecture on the following assumptions about **enabling** and **empowering** from Rappaport (1981) that are summarized by Dunst & Trivette (1987, p. 445):

This set of assertions includes three conditions that reflect the way in which we need to think about helping relationships and **empowerment**.

1. People are already competent or that they have the capacity to become competent.

2. The failure to display competence is not due to deficits within the person but rather the failure of social systems to create opportunities for competencies to be displayed. Creating opportunities for competence to be displayed is what we refer to as **enabling** experiences.

3. The person who is the learner, client, etc. must attribute behavior change to his or her own actions if one is to acquire a sense of control. This is what we mean when we say a person is **empowered**.

Collectively, these three assertions suggest the importance of the help givers' behavior as part of both **enabling** and **empowering** families. It is unfortunate, however, that many helping acts have usurping rather that **empowering** consequences.

The goal (of family systems intervention) is to identify family needs, locate the informal and formal resources (and support) for meeting those needs, and help link families with the identified resources.

The FACILITATOR gives the **HANDOUT: Principles for . . .** and discuss its points. If possible use examples from the earlier discussion to support these points.

POINT: "**HELPING** may be considered effective only to the extent that help seekers become more capable, competent, and **empowered** as a result of the help giving act." Dunst & Trivette (1987)

OBJECTIVE 8

To discuss how the use of **Interpersonal Techniques for Communicating with Families** supports the helping relationship and **empowerment**.

Return to **HANDOUT: INTERPERSONAL** and ask members of the audience to select responses they believe will add to a parents feelings of competency, being "in control" or self-confidence.

For Example,

- Discuss #22. (Encouraging formulation on a plan of action).

Then ask:

- How does encouraging description of perception (#9) help a parent feel more in-control or self-confident?

NOTE: The concepts of **Enabling and Empowering** are inherent in the "Family Functional Style", "Interviewing", "Partnerships", and "The Individualized Family Service Plan" topics in this book.

ADDITIONAL ACTIVITIES FOR LISTENING AND RESPONDING

OBJECTIVE 9

To participate in roleplay activities emphasizing listening types.

The following situations should be reproduced on cards and given to groups of 5-6 people. One or two take the role of parents, the rest are listeners. "Listeners" cards should be made up to include one of the four listening types just discussed: Active, passive, active non-listening, passive non-listening. One "listener" should be selected to roleplay with a "parent." The parent should be unaware of the listener type. The point can be made in a 2-3 minute interaction with each parent/listener dyad. Include nonverbal clues in the roleplaying.

- The parent doesn't feel his child is getting enough language development in the classroom
- Both parents have been called to a conference regarding their son and both attend. The conference is routine and normally used to discuss report cards. Each parent is concerned about a different part of the report.
- A parent shows up before school to discuss her daughter's sudden teariness.
- This parent has volunteered to help in the classroom, but has never done it before and has concerns about his ability.
- The leader should add several situations to this list based on the school or center of the participants.

OBJECTIVE 10

To review and practice **Interpersonal Communication Techniques.**

Review the techniques of active listening, (CONS: clear, open-ended, neutral, and singular), and the **HANDOUT: Interpersonal Techniques for Communication with Families.**

Divide the participants into groups of 7 to 10 people. Use the **HANDOUTS: Simulated Interview 1 and Simulated Interview 2** for this activity. The

FACILITATOR should role-play the first interviewer. If there are several groups, explain the activity and ask for volunteers. Tell the participants that this is a learning activity, that other activities will follow, giving as many people as possible a chance to practice. Remind them to keep their comments positive. Interviewing takes a great deal of practice and nobody expects anyone to be perfect. The goal is not necessarily to critique the interviewer but for each person to see if he can recognize the Interviewing Competencies.

When the role-play is finished, ask each group to discuss their "findings" from the Simulated Interview handouts.

OBJECTIVE 11

To practice and evaluate active listening skills.

Next, ask the participants to divide up into pairs to practice active listening. Ask them to take turns being the listener/interviewer or the speaker. During the interview, the speakers should respond to the following question:

> "If you had the option for further training in this occupation or any other field what would you like to do?"
>
> or
>
> Have the large group decide on what questions could be asked.

After both people have had a turn, give out the **HANDOUT: Self/peer checklist**. Ask them to complete it together, one for each person.

OBJECTIVE 12

To practice and evaluate **interpersonal communication techniques.**

Repeat objective 9 except using simulated interviews 3 and 4. Ask participants in each group to agree upon a goal. They can use one from Objective 9 or any they can think of. In this role-play they are to interview the "parent" to arrive at strategies.

NOTE: Additional simulated interviews are included in background materials for further practice.
This activity is particularly useful during workshop session on the section called Understanding Family Variables.

INTERVIEWING

GOAL: To learn culturally responsive techniques of **INTERVIEWING** which encourage parents to discuss their perspective of the child and family.

RATIONALE: The field of anthropology has long utilized **interviewing techniques** that assure non-judgmental gathering of information. Over time the techniques have been proven effective. By adapting these techniques, it is possible for early childhood interventionists to be certain that the perspective of the parent is unclouded by the perspective of the professional.

NOTE: Willing parents should be invited to participate in role-play activities in this section of the workshop (See PREPARATION FOR TRAINING: Soliciting Parent Participation).

The information in this section is based on personal communication with Carol Westby, Ph.D. Dr. Westby has applied methodologies from anthropology to working with families in early childhood/special education. For more information see Westby, C.E., (1990), Ethnographic interviewing: Asking the right questions to the right people in the right ways. Journal of childhood communication disorders.

OBJECTIVE 1

To discuss the rationale for using interviewing techniques.

The FACILITATOR display the **OVERHEAD**: **We should be ...** and discusses the rationale for **INTERVIEWING** (see pervious page for the rationale.)

OBJECTIVE 2

To understand and discuss interviewing techniques.

Display the **OVERHEAD**: **CONS** (clear, open-ended, neutral and singular) and give the **HANDOUT**: **What are Good Questions.** Use the HANDOUT as a basis for the MINI-LECTURE.

Solicit audience suggestions at each point: **clear, open-ended, neutral**, and **singular**.

OBJECTIVE 3

To observe and discuss **Interviewing** techniques.

Display the **OVERHEAD**: **INTERVIEWING** and give the **HANDOUT**: **The basics of Quality Interviewing.** Use the **HANDOUT** as a basis for the MINI-LECTURE.

Stop after **GRAND TOUR** and **MINI TOUR** (Spradley, 1979) for **DEMONSTRATION**. Ask participants to observe a live interview between a parent and the FACILITATOR. The FACILITATOR demonstrates **GRAND TOUR** and then **MINI TOUR** questions that relate to the IFSP process. (See the INDIVIDUAL FAMILY SERVICE PLAN in section V.)

Ask Audience:

1. Did the reasons for the questions seem **clear** to the parent? How do you know?

2. Were they **neutral**?
3. What did you recognize as rapport building?

4. How do you know when the interviewer was **listening**?

Ask the parent to respond regarding the audience comments.

Continue the MINI-LECTURE and display the **OVERHEAD: Grand tour.** Explain **EXAMPLE, EXPERIENCE, NATIVE LANGUAGE, HYPOTHETICAL, FEELING and OPINION questions.**

Return to the DEMONSTRATION interview with the parent, picking up where you left off. Ask various types of questions as appropriate to keep the flow going. Try to solicit information about strengths, values (preferences), and expectations.

NOTE: This should last 15-20 minutes or less.

Ask participants:

1. What strengths did you hear?
2. What expectations did you hear?
3. What values or preferences did you note?

Ask participants to take out several pieces of paper. On one sheet write down the strengths they heard. On another sheet have them list any preferences or priorities they heard. Ask them to hold on to these pages, since they will be used later in the workshop.

Continue the interview and arrive at one or two outcome statements. Ask participants to write these down on another piece of paper. Save these with the strengths and priorities written earlier.

NOTE: This will be the first step to developing an IFSP document. By the end of the workshop, participants will have collected all content components required by law of the IFSP.

OBJECTIVE 4

To practice **interviewing** techniques through roleplay activities.

Tell the audience they can now participate in the role-play by asking various types of **ethnographic** questions. Remind them to ask **clear, open-ended, neutral**, and **singular** questions.

SUMMARY

Summarize **Interviewing** and ask for questions.

Give the **HANDOUT: Guidelines for Communication**. Tell participants that this can be used as a "self-check" or reminder.

ASSIGNMENT

Ask participants to **interview** at least one person on one of the topics below. At the next session, discuss the assignment.

1. Holiday dinner
2. Staff meetings
3. Thoughts on year-round school
4. Pets

NOTE: See additional information and handouts in background materials.

TRAINING MATERIALS

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SECTION II:

INTERPERSONAL COMMUNICATION SKILLS

- * Self-Awareness: Beliefs and Values
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CLARIFYING BELIEFS AND VALUES

Below are some topics that, when discussed, reflect beliefs and values that we all hold. It is important to know what you believe. When you work with other people as a service provider it is important to remain neutral. In addition to remaining neutral or non-judgmental, it is important to try and see the world from the other person's perspective. Often this is difficult to do, and takes effort on the part of the service provider. Give some thoughts to your feelings about these topics.

recycling paper, aluminum
conservation
equal rights
civil rights
poverty
welfare
death penalty
physical punishment of children
social responsibility
zero population growth
education for all people
parent roles
marital roles
professional roles
flexibility
communicating emotionally; communicating rationally
mothers of young children in work force
hiring the handicapped
respite care
accessing family support

Remember, don't assume that love, marriage, rain, worship, trees, children, death, food (to name a few out of thousands) have the same meaning to all people. Think about how your beliefs and values might get into the conversation with parents. What do you do if you feel so strongly about something that you cannot remain neutral? When is neutrality not expected of professionals? If parents ask for your opinions and your advice, can you share them?

FAMILY LIVING: A CULTURAL INVENTORY

I. FAMILY CELEBRATES A BIRTH (Examples follow)

By having a meal: Special Foods. . .

Celebrants: Relatives, Friends, Neighbors,
Business Associates. . .

Activities: Ceremony, Music, Dance, Other. . .

Traditional Gift:

Example I - "Neighbors took turns bringing us food while mom was in the hospital . . . and cleaned our house."

Example II - "When we were baptized, everybody was invited to come eat after church. Food always included arroz con pollo, and gallina en mole and sometimes barbacoa. Adults always had beer and wine. There was always dancing after the meal. A traditional gift was silver dollars from the grandparents and also gold jewelry."

Example III - "When mom and baby come home there were two ceremonies. One was private and only the grandparents and aunts and uncles could attend. It was the naming ceremony in which the newborn was given its Indian name. It was done at sunrise and with the Medicine Man. Grandma would give us our Indian name. The other was when we were baptized. Friends and relatives were invited to come to the house and eat. Aunts and cousins come early in the morning to cook green and red chile stews, chicos, posole, and squash. The bread, cookies, and pies were baked the day before. While they finish cooking we go to mass and the baby is baptized then everyone came to the house to eat and talk and make jokes. Turquoise, coral, or silver jewelry were given to us for good health by our grandmothers."

Example IV - "Baby showers were always a part of celebrating a birth. In my family only the first born got a baby shower."

Example V - Everyone has a name and we don't always know who gave us our name, and why that name was chosen for us. My uncle said he had a bad time learning to write his name in school. When my little brother was born, he demanded my parents name him Roy, so that writing his name would not be so hard.

RAPPORT

RAPPORT is that illusive butterfly that flutters around all comfortable interactions between parents and the professionals who work with young children. Because it is a culturally defined attitude, it is nearly impossible to describe the measure. **RAPPORT** is that harmonious relationship that professionals are responsible for building with parents. It is a mutual feeling of trust and understanding. **RAPPORT** is not necessarily a deep, long lasting friendship, although this happens often in early childhood intervention.

RAPPORT is an ongoing process that varies from day to day. It is especially critical for professionals to think about building **RAPPORT** during the first contact with parents. Some tips for professionals to consider when building **RAPPORT** include:

* Be attentive when parents are speaking; demonstrate interest through body language and carefully worded questions.
* Be observant of feelings, beliefs, and values (your own as well as others).
* Be aware of unspoken cues.
* Adapt to the parents' pace and verbal expression.
* Reflect feelings.
* Be aware of humor and use it appropriately.
* Keep questions at a minimum at first.
* Be prepared to answer parental questions openly.
* Suspend judgment.
* Assure parents of confidentiality.
* Demonstrate respect.
* Be patient.

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A MODEL OF RAPPORT

James Spradley (1979) suggested that **RAPPORT** may develop in a patterned manner. His model is summarized briefly below:

APPREHENSION

When parents and service providers meet each other for the first time, there is usually a sense of uncertainty. Each may fear he will not meet the expectations of the other. Each may be saying "I don't know enough." It is up to the professional to put parents at ease, to let "them" know they have something to offer that will be valuable to the professional. The professional should be sure to listen, show interest, keep the parents talking about being parents, and empower and build confidence in them without being patronizing.

EXPLORATION

Parents may be asking silently: "What does she want me to say? Can she be trusted? Am I answering as I should? Is what I say irrelevant? Is what I say meaningless? This time of exploration can work from the professional side also, as questions are asked silently. It is necessary to build a sense of sharing and relaxation. The professional may have to set aside this agenda, go off on interesting tangents, and answer personal questions. It is during this exploration time that the professional must MAKE REPEATED EXPLANATIONS:

> "As I said earlier, it is important to me that I
> do things with John as your family would do them.
> So if you wouldn't mind telling me, how warm you
> keep him when he is inside. . . ."

This is also a time when it is good to RESTATE what the parent has told you. For example:

> "So I should wait for a good strong burp. . . ."

COOPERATION

Cooperation can happen from the very first interview, but usually takes one or two times before parents really feel comfortable with being "informants" for a professional. During this phase, parents don't question, rather they answer readily, without hesitation.

PARTICIPATION

Parents actually accept the role of "teaching" the professional during this phase. The professional also feels at ease with "teaching" the parents. A PARTNERSHIP is in place. the PARTNERSHIP may be less balanced and tilt more toward the professional because of the time it takes the professional to share technical knowledge regarding the handicapping condition or disability. It is up to the professional to keep checking back with the parent: "I have been doing a lot of talking. Will the changes I've suggested fit in with your life style and with the ways you want to deal with your children?" or "Does what I say fit with the way you see your child?"

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INTERPERSONAL TECHNIQUES
FOR COMMUNICATING WITH FAMILIES

	TECHNIQUE	EXAMPLES
1.	SILENCE	(This may stimulate a parent to bring up what is on his or her mind)
2.	ACCEPTING	Yes. Uh Humm I follow what you said. (nodding)
3.	GIVING RECOGNITION	Good morning... You've brought in a new toy. I notice that you look more rested...
4.	OFFERING SELF	I'm your child's (teacher/therapist). I'll stay here with you... You can call anytime.
5.	GIVING BROAD OPENINGS	Is there something you would like to talk about? What are you thinking about? What have the doctors told you? What have other therapists explained to you about...?
6.	OFFERING GENERAL LEADS	Go on. And then what happened? Tell me about it.
7.	PLACING THE EVENT IN TIME or in SEQUENCE	When did this happen? Was this before or after...? When were you told this?
8.	MAKING OBSERVATIONS	You appear tense (relaxed). You sound anxious (less anxious). Are you uncomfortable when you...? I notice that you are biting your lips.
9.	ENCOURAGING DESCRIPTION of PERCEPTION	Tell me when you've felt anxious. (safe) What is happening when this occurs? How do you feel about this?

10.	ENCOURAGING COMPARISON	Was this something like...? Have you had similar experiences?
11.	RESTATING	Parent: I can't sleep. I stay awake all night. Staff: You have difficulty sleeping now. Parent: I am afraid the phone will ring and that it will be the hospital. Staff: You are afraid you may get bad news about the baby when the phone rings.
12.	REFLECTING FEELINGS	Parent: My husband spends all the time working while I'm at home. (Sorrowful) Staff: This causes you to feel lonely. Parent: I just don't know what is going to happen. Staff: You are feeling real anxious about the future.
13.	FOCUSING	This point seems worth looking at more closely.
14.	EXPLORING	Tell me more about the time... Would you describe it more fully? What would you like to see us do for the baby?
15.	GIVING INFORMATION	My purpose for being here is... This part of the classroom is called the movement corner because...
16.	SEEKING CLARIFICATION	I am not sure that I follow... What would you say is the main point of... So the doctors told you that...
17.	SEEKING CONSENSUAL VALIDATION	Tell me whether my understanding of it agrees with yours. Are you using this word to get across the idea that...?

18.	VERBALIZING THE IMPLIED	Parent: I can't talk to you or to anyone. Staff: Is it your feeling that no one understands? Parent: I know we shouldn't have taken that long trip. Staff: Is it your impression that it was the long trip that caused your baby to arrive too early?
19.	ENCOURAGING EVALUATION	What are your feelings in regard to...? Does this contribute to your feelings of anger?
20.	SUGGESTING COLLABORATION	Perhaps you and I can discuss and discover what produces your uneasiness. Let's see if we can make your baby more comfortable. Any ideas?
21.	SUMMARIZING	Have I got this all straight? You've said that... During the past hour you and I have discussed...
22.	ENCOURAGING FORMULATION OF A PLAN OF ACTION	The next time this comes up, what might you do to handle it? Some parents have found it helpful to make a list of questions as they come up so that when they go to see the doctor they don't forget to ask something.

Author Unknown. Adapted by Project Ta-kós, 1988

PRINCIPLES FOR POSITIVE DONOR-RECIPIENT EXCHANGES

1. People respond better to help when donor characteristics are positive and proactive (Fisher, 1983b).

2. Help is more likely to be favorably received if it is offered rather than requested, and the recipient has the choice of whether or not to accept the help (Fisher et al., 1983b).

3. Help is more likely to be beneficial if recipients are personally not held responsible for their needs or problems, but are held responsible for solutions and their own maintenance (Brickman et al., 1983)

4. Helping relationships are more likely to promote positive responses when the donor conveys a sense of cooperation and joint responsibility (partnership) for meeting needs and solving problems (Hobbs et al., 1984).

5. Help is more likely to be beneficial if the donor bolsters the self-esteem of the recipient, and helps the individual experience immediate success in solving a problem or meeting a need (Nadler & Mayseless, 1983).

6. "Effective help leaves the recipient better off after the help than before, and maximally effective help leaves the recipient no longer in need of help" (Brickman et al., 1983, p. 29).

7. Help is more likely to be beneficial if it promotes the acquisition of effective behavior that decreases the need for help and thus makes the person capable and competent (Skinner, 1978).

8. Help is more likely to be favorably received if it can be reciprocated, and the possibility of "repaying" the help-giver is sanctioned and approved but not expected (Fisher et al., 1983b).

9. Help is maximally effective when the aid and assistance is congruent with the help-seeker's appraisal of his or her problem or need (Fisher, 1983).

10. People are more likely to accept aid and assistance when the response costs of seeking and accepting help do not outweigh the benefits (Gross & McMullen, 1983).

Adapted by Project Ta-kós, 1988
from Carl Dunst and Carol Trivette, Helping, Helpless, and Harm (1986)
See Dunst, Trivette & Deal; 1994

SELF CHECKLIST

Using the scale to the right, with 5 being the best rating, rate yourself on the following by asking "To what extent did I . . ."

A. INTERVIEWING SKILLS

1. Demonstrate warmth and caring 1 2 3 4 5
2. Recognize other in family 1 2 3 4 5
3. Demonstrate interest in family's independence; recognize values & beliefs 1 2 3 4 5
4. Demonstrate valuing individual differences 1 2 3 4 5
5. Have a sense of humor when appropriate 1 2 3 4 5
6. Enjoy the family; feel comfortable 1 2 3 4 5
7. Listen carefully to parents 1 2 3 4 5
8. Maintain listening posture 1 2 3 4 5
9. Display interest in parent(s) participation through body language 1 2 3 4 5
10. Use clear, open-ended, neutral, and singular questions 1 2 3 4 5
11. Talk less than 50% of the time 1 2 3 4 5
12. Use a variety of descriptive questions 1 2 3 4 5
13. Present information using terms understood easily by new parents 1 2 3 4 5

B. PROBLEM SOLVING

14. Work with family to look at options to meet needs; accept their options as valid 1 2 3 4 5
15. Help family develop decision making skills when appropriate and according to their values 1 2 3 4 5
16. Help family utilize resources within their own network 1 2 3 4 5

C. SUPPORT AND PARTNERSHIP

17. Help family recognize their strengths 1 2 3 4 5
18. Respond positively to parent comments 1 2 3 4 5
19. Point out ways family is competent and has acted successfully, without being patronizing 1 2 3 4 5
20. Demonstrate a willingness to "be there" for the family when needed 1 2 3 4 5
21. Share part of self when appropriate 1 2 3 4 5
22. Request advice from parents 1 2 3 4 5
23. Share knowledge and expertise 1 2 3 4 5

* Self checklist should be done over time

This information was adapted by Project Ta-kós, 1988 from work by Roger Kroth and from the Family, Infant, and Preschool Project in Morganton, North Carolina.

WHAT ARE GOOD QUESTIONS?

Patton (1980) has suggested that good questions are **open-ended, neutral, singular,** and **clear**. These guidelines should be followed for each type of question described on the following pages.

CLEAR

Be sure you are **clear** in your own mind about why you are asking a certain question. How will the information help you? How will you use the information? Also be **clear** about the manner in which you ask the question. Below are some guidelines:

1. What terms does the parent know and not know?
2. Use the "language" of the parent when possible.
3. Be sure you and the parent mean the same thing.

EXAMPLE: "You explained some differences you noticed from last year to this year. Let me ask you what you mean by Jimmy 'seems to walk better'. Describe how he walks better so that I know we are talking about the same thing."

OPEN-ENDED

According to Patton (1980, p.212) truly **open-ended** questions allow the parent being interviewed to select from among the parents' full repertoire of possible responses. Parents can take whatever direction and use whatever words they want in order to present what they have to say.

When you ask an **open-ended** question, you won't just get a YES or NO or short answer. You will get the person's complete thoughts on the subject. You may even get a response that is totally unexpected. Below are examples of closed questions that can be made more open.

EXAMPLE: (CLOSED) "From my description of our program, do you think it will be a good program for your daughter?"

(OPEN) "From my brief description of our program, what things do you think will be good for your daughter?"

"I have given a description of our program, what things do you think will be good for your daughter?"

"How do you think you will describe your daughter's program to your mother-in-law?"

It is unreasonable to assume that you will only ask open-ended questions during an interview or contact with parents.

NEUTRAL

Neutrality means that the parent can tell you anything without endangering either your favor or disfavor. Therefore **neutral** questions do not reflect your own thoughts or values. It means you don't let your own thoughts or values get into your questions. Let's begin with an example of a NON neutral question:

EXAMPLE: (NON Neutral): "I don't really think Jane can accomplish all that this year, do you?"

(NEUTRAL): "What is your best bet about what Jane will do by the end of this year?"

SINGULAR

Singular means just that: one question at a time.

EXAMPLE: (NON Singular): "Tell me about the forms that make sense and the ones that don't make sense to you."

(SINGULAR): Which forms make sense to you?

Adapted by Project Ta-kós, 1988

THE BASICS OF QUALITY INTERVIEWING

By using basic interviewing techniques borrowed from the field of anthropology (ethnographic interviewing), it is possible to gather information from parents in a non-biased, non-judgmental manner. The interviewer is saying: "I want to understand your situation from your point of view. I want to understand the meaning of your experience, to walk in your shoes, to feel things as you feel them, to explain things as you explain them. Will you become my teacher and help me understand?" The techniques used to gather information are different from the techniques used to be supportive and empowering, although both should occur during any interview.

Ethnographic interviewing involves the use of DESCRIPTIVE QUESTIONS. These questions are used to encourage parents to explain what they do with their child, how they see the child, how they view the child's needs, how they view child-rearing, what they consider problems, or how they cope. The reasons you are asking these questions should always be communicated to the parents. For example, you might begin by saying:

> "You are the person who is around Sara more than anyone else. If it is all right with you, I would like to ask you questions that will help me understand her better."

or

> "I have done some detailed studying about (cerebral palsy), and I know that all children with that diagnosis are different from each other. I need to learn everything I can about Sara. You have the best information about her and I hope you will share this with me."

TYPES OF QUESTIONS

There are six major types of descriptive questions: **GRAND TOUR, MINI TOUR, EXAMPLE EXPERIENCE, NATIVE LANGUAGE, HYPOTHETICAL and FEELING or OPINION questions.** Each is described briefly below.

GRAND TOUR

Have you ever taken a friend on a grand tour of your home? or of your work? or of your child's school? When interviewing using a **GRAND TOUR QUESTION**, you ask the parent to take you on a **grand tour** of their experiences or thoughts. A **grand tour** encourages rambling. Words you might use in a **GRAND TOUR** question include: generally, typically, usually, recently, the last time, yesterday . . .

EXAMPLE #1: The interviewer says: "Would you think back to things you've noticed about Adam. Would you tell me what comes to mind. Anything that comes to mind that stands out."

EXAMPLE #2: "How would you describe Adam."

EXAMPLE #3: "Tell me about a typical day with Adam."

EXAMPLE #4: "Picture yourself with Adam. Would you tell about how the two of you get along together?"

EXAMPLE #5: "If you can, please tell me how you see Adam in about 12 months."

The parents will now spend some time answering the question you have asked. You need to be ready to listen and encourage the parents to keep talking. If possible you need to take notes, or tape record with permission. Are these suggested GRAND TOUR questions **clear? open-ended? neutral? and singular?**

MINI TOUR QUESTIONS

Once the parent has finished telling you about his or her experience, you may now want to ask some **MINI TOUR** questions. These are questions that you want to clarify based on what the parents said as they responded to your **GRAND TOUR** question. Below are several examples:

EXAMPLE #1: "You started to say earlier that your sister had some ideas about Adam. Would you talk about that?"

EXAMPLE #2: "You described a full and exciting typical day with Adam. You also said your mother and father take care of him on Wednesday. Would you tell a little of what they do?"

EXAMPLE #3: "You said you and your husband like to take Adam to the park. What things does he seem to like best there?"

(It is difficult to give examples of **MINI TOUR** questions, because they come from the context of the response given when parents answer the **GRAND TOUR** question.)

Be certain when you ask any question that it is not phrased in such a way that may suggest disapproval. It is also good to concentrate on supporting parents whenever possible during your questioning, such as "You described a 'full and exciting day'..."

EXAMPLE QUESTIONS

Example questions are still more specific and give you a clearer picture of what the parents have in mind during their response. Take some single act or event mentioned by the parent and ask for an example.

EXAMPLE #1: "You said Adam calms down when you sing to him. Would you give me an example of his calming? How would you describe his calming?"

EXAMPLE #2: "Earlier you said you had to teach your mom to hold Adam the right way so that he can get the food down easier. Would you give me an example of what you told her?"

EXAMPLE #3: "You said your father seems to understand Adam's differences in crying. Would you give me an example of what that means?"

EXPERIENCE QUESTIONS

These questions are usually asked after several **GRAND TOUR** and **MINI TOUR** questions. As the name suggests, the point of an **experience** question is to get the parent to elaborate on their experience about some event or activity.

EXAMPLE #1: "You have probably had some scary experiences with Adam's seizures. Would you tell me about some of them?"

EXAMPLE #2: "Describe your last experience with the hospital."

EXAMPLE #3: "When you think back, what were some of the most successful ways you told friends about Adam's diagnosis?"

NATIVE LANGUAGE QUESTIONS

It is natural for most people to try and explain or describe something in the language they think will be best understood (or most accepted) by the interviewer or the listener. Parents talk differently to other parents than to professionals. Professionals talk differently to other professionals than to parents. **NATIVE LANGUAGE** questions simply ask "How would you refer to it?" when a parent uses a particular term.

EXAMPLE #1: "You said Adam seems floppy. What other words would you use to describe his floppiness?"

EXAMPLE #2: "When you were talking about your day with Adam, you said you 'position' him a certain way in the stroller. This sounded like an excellent idea. Tell me about other types of positions you've tried with him."

EXAMPLE #3: "I would like to go back to when you mentioned Adam's 'little' seizures. Would you use any other words to describe that?"

EXAMPLE #4: "I explained the word 'outcome'. Would you tell me the words you would use to mean outcome?"

HYPOTHETICAL QUESTIONS

Hypothetical questions are best explained by the following examples:

EXAMPLE #1: "If you could have two wishes right now for Adam, what would you wish for first?"

EXAMPLE #2: "Imagine a day where you are in complete control of everyone and every event. Describe that day to me."

EXAMPLE #3: "Imagine for one minute that you had all the bills paid and had extra money for something for the boys. What would you get for them?"

EXAMPLE #4: "Let's just say that Adam has a problem and you can't reach your parents or your husband to come for you. What will you do?"

FEELING AND OPINION QUESTIONS

The final type of question asks a parent his/her **opinion** or how s/he **feels** about a certain event, situation, or another person.

EXAMPLE #1: "Tell me how you feel about that doctor now?"

EXAMPLE #2: "In your opinion, what is the best way to dress Adam?"

EXAMPLE #3: "You said you feel the nurse has an evil eye. What do you think is the best thing to do when you have to take the baby into that office?"

EXAMPLE #4: "In your family, what is the best thing to do when a baby has a cold?"

EXAMPLE #5: "When I come to see Vicky, should I speak first to you or to your aunt?"

EXAMPLE #6: "How do you feel about doing these exercises with the baby during her bath?"

As you interview parents, remember to make your questions **clear, open-ended, neutral, and singular**. Be sure to explain several times why you need the information. Listen very carefully to each response and do not interrupt unless your time is so tight that you must get certain questions answered. Take notes, or use a tape recorder if the parents agree. At any time you feel comfortable, say something to the parents that shows you appreciate their competence, cleverness, and love in raising their child. Do this without being patronizing. Do this sincerely.

The above material (with the exception of the **FEELING AND OPINION** questions) is adapted from two books by James Spradley: The Ethnographic Interview and Participant Observation. Remember, the purpose of this type of interviewing is to gain information about a child and how the child's parents prefer others to interact with her. In this way a true collaboration between service providers and families can be attained. This type of interviewing takes practice and time to master. Try it out first with your kids, spouse, mother, and bill collector!!

Before you begin any interview, be very clear to yourself and the parent being interviewed about the purpose of the questions you are going to ask. If you have hidden agendas, or if you ask questions that reflect only your own thinking, values, or philosophy, your questions will end up value-laden and judgmental. If this happens, you will not gain the knowledge you need to work well with the family.

Adapted by Project Ta-kós (1988), from Westby, C.E., (l988, January), Introduction to ethnographic interviewing as it relates to assessing family functioning and needs. Information presented at "Working with families towards a successful I.F.S.P.'s." Santa Fe, NM. A workshop sponsored by the Early Childhood Training Unit; University of New Mexico School of Medicine; Albuquerque, NM.

GUIDELINES FOR COMMUNICATION

You can become more aware of your attitude(s) toward parents by asking yourself questions such as the following:

- Do I accept the parents where they are, in terms of their needs, and not mine?
- Do I encourage parents to talk with me? Do I ask open-ended questions and avoid yes-no questions and closed questions?
- Do I try to develop trust and show the parents I am interested in them? Am I an active listener? Do I moralize and pass judgments?
- Do I really listen? Do I establish eye contact with the parent and avoid being busy doing other things?
- Do I finish my sentences? Do I allow parents to finish their sentences?
- Do I use the same phrase over and over, for example, "Gee, I understand"?
- Do I involve the parents in decision making and problem solving? Do I make them feel a part of the program?
- Do I accept what the parents say? Do I respect the parents as adults?

The result of regular "checking with yourself" can be a tool for developing sensitivity to a parent's position and viewpoint.

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SECTION II:

INTERPERSONAL COMMUNICATION SKILLS

- * Self-Awareness: Beliefs and Values
- * Rapport
- * Listening/Responding Skills
- * Interviewing Skills

Overheads:

The More We...
Building Rapport
Good Quality Questions (C.O.N.S.)
Interviewing
Grand Tour

"THE MORE WE

BECOME AWARE OF

WHAT OUR

VALUES ARE,

THE LESS WE NEED

TO IMPOSE THEM

ON (OTHERS)"

Benjamin, (1981)

BUILDING RAPPORT

* be attentive/demonstrate interest
* be observant
* be aware
* be adaptive
* reflect feelings
* be aware of humor
* question minimally
* be open
* suspend judgment
* assure confidentiality
* demonstrate respect
* be patient

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GOOD QUALITY QUESTIONS
(C.O.N.S.)

* CLEAR

* OPEN ENDED

* NEUTRAL

* SINGULAR

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INTERVIEWING

1. Ask Question:
    - Grand Tour
    - Mini Tour
    - Example
    - Experience
    - Native Or Natural Language
    - Hypothetical
    - Feeling Or Opinion
2. Listen
3. Give Support Responses

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GRAND TOUR

MINI TOUR

EXAMPLE

EXPERIENCE

NATIVE LANGUAGE

HYPOTHETICAL

FEELING OR OPINION

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SECTION II:

INTERPERSONAL COMMUNICATION SKILLS

- Self-Awareness: Beliefs and Values
- Rapport
- Listening/Responding Skills
- Interviewing Skills

Supplemental Materials:

Values Clarification For Professionals
IFSP: Clarifying Our Values
Values Clarification
Person To Person Contact: Listening
Types Of Responding
How to Read Body Language
Your Body As A Vehicle Of Communication
Interviewing Concept

VALUES CLARIFICATION FOR PROFESSIONALS

It would be most difficult for me working with:
- a. a person of a different race.
- b. a person of a different sex.
- c. a person of an obviously different socioeconomic class.

I would have difficulty working with someone who confessed to me:
- a. lying.
- b. cheating.
- c. promiscuous sexual relations.

I am most comfortable working with people who are:
- a. verbally articulate.
- b. actively gesturing.
- c. pensively attentive.

My overall helping style is probably:
- a. fairly directive.
- b. fairly nondirective.
- c. somewhere in between directive and nondirective.

I am most comfortable with people who are:
- a. independent and able to take responsibility for themselves.
- b. helpless and needing my direction.
- c. resistant to helping.

I feel uncomfortable expressing feelings involving:
- a. loving.
- b. hating.
- c. resentment.

I consider myself to be:
- a. self-controlled.
- b. spontaneous.
- c. forgiving.

It is difficult for me to:
- a. let things take their own course.
- b. take action and responsibility for getting what I think is necessary.
- c. let someone else take initiative.

I believe:
- a. that I am an empathetic and nonjudgmental person.
- b. that my colleagues see me as empathetic and nonjudgmental.
- c. that both a and b (above) are true.

Adapted from Davis, J.H., (1981) The Ecology of Care

IFSP: CLARIFYING OUR VALUES

No one discipline has all the services needed by a young handicapped child and his family.

No one agency has all the services needed by a young handicapped child and his family.

A team approach is needed.

A multi-agency team approach is needed.

When services needed are not available, the early intervention program should provide them.

"Let's pause to consider what would happen if we had a Copernican revolution in the field of . . (early intervention) . . The family is the center of the universe and the service delivery system revolves around it." (Turnbull and Summers, 1985)

The service needs of children and families will change over time.

The family is the link among the service providers.

The family is the primary decision-maker about service needs and child and family program priorities.

"The system must enable the family to function as primary decision-makers, care givers, teachers, and advocates." (Shelton, Jeppson, Johnson, 1985)

Sharing of unbiased and complete information is necessary.

Information brings power and control for families.

Each interaction with a family should be planned to make the family increasingly independent of the service provider - as decision-maker, care giver, teacher, and advocate.

Dependence is encouraged when professionals make decisions which could more appropriately be made by parents.

Dependence is encouraged when professionals provide services which could more appropriately be provided or arranged for by families.

IFSP: Clarifying our Values (cont'd)
Page Two

"Dependence is not compatible with the goal of building parental competence." (Healy, et. al, 1985)

Parents should be encouraged to be case managers.

Parents should be equal members of the early intervention team.

Parents should be captains of that team.

Parents should be encouraged to determine the role that they want to play.

An early intervention program should increase the child's ability to function in the least restrictive environment.

Individual family needs should be the basis for program planning.

Individual family strengths should be the basis for program planning.

Individual family values should be the basis for program planning.

Individual family values should be respected and considered in program planning.

VALUES CLARIFICATION

On a scale of 1 to 5, rate yourself on the following:

1. How much freedom do you want in making everyday decisions?
2. How much personal freedom do you have?
3. How active are you in the community?
4. How do you feel about fighting?
5. How are you at making decisions?
6. How do you feel about competition?
7. How responsive is your partner to your needs?
8. How responsive is your partner to your children's needs?
9. How responsive is your partner to his/her own needs?
10. How much do you talk to other people?
11. How well do you listen to others?
12. How do most people relate to you?
13. How do you relate to most people?
14. What percentage of the time are you happy in a given day?
15. How helpful are you to others outside your family?
16. How much do you watch TV?
17. What kind of holiday celebrant are you?
18. What percentage of your waking hours do you spend alone?

WORKING WITH FAMILIES: A GUIDE FOR TRAINING PERSONNEL IN EARLY CHILDHOOD/SPECIAL EDUCATION SETTINGS

Unit 6

PERSON-TO-PERSON CONTACT: LISTENING

INTRODUCTION

One of the problems that teachers and therapists often have is that they are quite verbal people; they abhor silence. As a result, if there is quiet during an interview, the service provider is apt to step in and talk. (The Flanders Rule of two-thirds says that in a normal classroom, two-thirds of the time there's talk going on, two-thirds of the time is teacher talk, and two-thirds of that teacher talk time is directive teacher time. The same is probably true of interviews & conferences with parents.) With this in mind, it would be interesting to have professionals video tape some of their conferences and record the amount of time devoted to parent talk. If Wendell Johnson is correct in his assumption, that we are our most enchanted listeners and we learn from what we say, then professionals would be learning more in a conference than parents. This does not mean that it is inappropriate for them to talk when they are sharing information with parents. However, if one wants to encourage a parent/educator partnership, it behooves the teacher or other professionals to allow the parents plenty of talk time.

A Listening Paradigm. A Listening Paradigm (Kroth, 1975) is a model developed to analyze listening styles of people and hopefully it serves as a model where people can look at their own styles. The vertical line on Figure 1 goes from LISTENING at the top to NON-LISTENING at the bottom and would suggest that most of us fit someplace along that continuum. We can be very passive in the way we react to someone talking, or quite active. This is not to suggest that we don't change from time to time or from situation to situation but it does allow us to reflect on our most common characteristics. The letters A, B, C, and D are placed in the quadrants. For instance, the B is in the quadrant which includes both listening and active. This would suggest that a B type person would be an active listener. Below is a discussion of the different listening styles based on the four quadrants.

What is an ACTIVE LISTENER? How do we know when we are around one? There are probably a number of verbal and nonverbal behaviors that give us a clue that we are around an active listener. What are some of the nonverbal behaviors?

(Quite often there is head nodding, eye contact, perhaps even a leaning forward toward the speaker and the body positioning that goes along with this.) These nonverbal behaviors seem to be an indication to the other person that the listener wants him to talk more. it helps encourage a person to express himself. One may even have a questioning look or a look of anticipation that says to the other person, "Tell me more".

Verbal behaviors from an active listener may be reflective in nature or present a restructuring of the content. These statements in some way mirror what the person has said and the attempt of the listener to make sure he understands the content of what the person is trying to convey. The reflected statements could relate to feelings that are expressed by the person who is talking.

Another behavior that is sometimes used by an active listener is note-taking. However, there is a certain amount of controversy over note-taking. Some people feel it detracts from the flow of conversation and other people feel that it heightens it. The message to the person doing the talking often is, "I think what you're saying is important. I want to remember it, so I am making a note of it." For example, a parent goes to the teacher and tells the teacher something important about her child or something that needs to be done. That mother would be reassured that her concerns are heard if the teacher takes notes.

An active listener seems to accelerate the talking behavior of the person he's listening to. The importance of an active listener is paramount to collaborative goal setting, and parent partnerships.

There are some people who listen but who are not particularly verbal in their communication (PASSIVE LISTENER). These are people who are comfortable to be around and who do not demand to do a lot of talking (nor do they talk about themselves in most situations). Sometimes they insert an "Uh huh", or "Mm, I see", but other than that, they are not verbally active in the conversation. A passive listener may be someone parents seek out when they do not want an answer, but just want someone to listen who will give them a chance to talk something through.

An example of the PASSIVE NON-LISTENER may be the spouse who sits behind the paper and occasionally says, "Uh huh", keeping the other person talking for a period of time. Eventually the speaker will say, "You are not listening to me". At that time, the spouse might repeat back to the speaker many of the things he said. This, of course, is quite frustrating. What is actually happening? The person may be hearing but not listening.

Listening for long periods of time is hard work. It is obvious that from time to time one will move from being an active listener to being a passive listener to being a passive non-listener.

A LISTENING PARADIGM*

LISTENING

PASSIVE LISTENER

comfortable to be around

not verbally active

the person you seek out when you do not want an answer

ACTIVE LISTENER

encourages person to express himself by using gestures (nods, eye contact)

makes sure person is understood by reflecting speaker's conversation (content and feeling)

PASSIVE — ACTIVE

PASSIVE NON-LISTENER

may hear but does not listen

gives non-verbal message that makes speaker feel not listened to

ACTIVE NON-LISTENER

picks up thread of conversation that is interesting to listener but not related to what speaker is trying to say

has different agenda than speaker

NON-LISTENING

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* Kroth, R.L., Communicating with parents of exceptional children. Denver, Colo: Love Publishing Company, 1975.

Consider the following as an example of an ACTIVE NON-LISTENER:

Parent: Billy had the neatest thing happen to him on his way home from school.

Teacher: How does he go home from school?

Parent: Down Center Street and . . .

Teacher: Isn't that past the fire station?

Parent: Yes, and . . .

Teacher: Last year five of our boys said they wanted to be firemen when they grow up. What does Billy want to be?

Parent: A nuclear physicist.

Teacher: Isn't that cute? And to think he can't even spell it. What happened to him on the way home?

Parent: Well, he ran into this man who . . .

Teacher: I hope he said "excuse me". We stress good manners in our room. We have a unit on the magic words - Please and Thank You. I hope you notice the improvements at home.

With a little practice, almost anyone can become an expert in active non-listening!!

It is very possible that in some of our conferences that the service provider may take off on one of the threads of a parent's story. It may be because that particular thread is something that interests the teacher and has to do with the way the child performs in the classroom. However, what happens is that the parent is never allowed the opportunity to tell the story that he intended to in the first place. That story may have been the parent's method of communicating an event related to the child's performance.

It is entirely possible that many conferences are of the cocktail party nature. By this we mean that one person, the professional, has an agenda of things that he or she wants to talk about. At the same time, the parent has an agenda of things that he or she would like to talk about. The conversation might go something like this:

Teacher: I'm so glad you could come. I've been wanting to talk to you about Billy.

Parent: I'm having trouble getting Billy to do his homework. He always wants to put it off, and we have frightful arguments around home.

Teacher: He's been fighting on the playground. I've had to keep him in from recess twice this week.

Parent: I don't think he understands the new math. That's probably why he doesn't do this homework. I wish you could do something about it.

Teacher: Do you have any idea why he's started fighting so much? Does he ever talk about it at home? We just don't know what to do with him. It's getting to be a real problem.

Parent: We're having a real problem, too. We're open for any suggestions. This arguing is getting both his Dad and me upset.

Teacher: At school, we want to cooperate in any way that we can. If you have any ideas about his fighting, call me, will you? It's sure been nice talking to you, and I'm so glad you could come. You're always welcome at school.

Parent: I'm happy to have met you. If you have any ideas how we can help at home, just call. We want to work closely with the school.

This type of conferencing probably happens more often than one would like to believe. Both parent and teacher are trying to communicate and cooperate, but they are not taking the time to listen to what the other has to say. Little was accomplished, but both leave feeling that at least they have had their say about their problems.

It is conceivable that many of our conferences go something like the situation just presented. Whose responsibility is it to be the listener in that situation? It seems that the teacher, being the professional with training and skills, should be the one to be the listener. It is probable that neither problem will be solved until one of the issues is taken care of satisfactorily. In this case, the teacher might as well stop and take care of the new math problem or listen until the parent has a chance to express all the feelings about this particular situation. Another conference to discuss the fighting situations will have to be arranged.

People do not fit neatly into one of the four quadrants. Most move from quadrant to quadrant depending on the situation; however, there is probably a propensity to be consistently more of one type than another. A good way to analyze one's behavior is to tape record an interview and listen to it carefully.

Krehbiel, R., (revised 1987), Working with Families: A Guide for Training Personnel in Early Childhood/Special Education Settings. pp. 106-111. Outreach Project. Albuquerque Integration Model. Alta Mira Specialized Family Services. P.O. Box 7040, Albuquerque, NM 87194-7040.

TYPES OF RESPONDING

Rogers and Roethlisberger (1952) formulate the following types of responses in order of most to least frequently used in everyday conversation: Evaluation, Interpretive, Supportive, Probing, and Understanding. The following descriptions give the major characteristics of each type of response:

Types of Responses

A. **Evaluative (Advising):** A response in which the intention is to make a judgment of the relative goodness, appropriateness, effectiveness or rightness of the statement. The receiver has in some way implied what the sender might or ought to do. This response puts the responder in the position of the expert who has the answer to the problem.

Example: "If I were you I wouldn't let him get away with it, he is just taking advantage of you."

B. **Interpretive (Analyzing):** A response in which the intention is to tell the other person what the problem really means, the responder indicates that he knows the cause of the problem. It tells the person with the problem what he should think. The responder feels he knows the cause of the speaker's feelings and then proceeds to explain them.

Example: "You feel that way about the principal because you basically do not trust anyone in positions of authority."

C. **Supportive (Reassuring):** A response that intends to reassure and pacify or minimize the feelings of the sender. The responder conveys that others have felt that way before and that things are not all that bad and the feeling will soon go away. The responder wants the sender to feel better. The responder has in some way implied that the sender need not feel as he does.

Example: "We all have days like this once in a while and I'll bet tomorrow the kids will come in, settle down and all will be forgotten."

D. **Probing (Questioning):** A response that indicates the responder's intent is to seek more information, provoke further discussion along a certain line, to question the sender. Probing responses are used to clarify confusing areas, to find out something not said, to narrow the content of topics or to change the focus of the interchange. The responder implies that the sender might profitably develop or discuss a point further.

Example: "Why did you decide to drop out of math? Didn't you know you would need that for graduation?"

E. **Understanding (Paraphrasing, Reflecting, Clarifying):** A response that checks out whether the responder correctly understands what the sender is saying, how the sender sees and feels about the problem. It says, "This is what I understand -- is that correct?" This response shows that the responder's tuned in to what the sender is saying and how the sender feels about the situation.

Example: "You really want to ask her for extra help, but you don't really want to draw attention to the problems you're having."

The responses are neither good nor bad in and of themselves -- they serve different purposes. It is, however, worth noting that the order of frequency in everyday conversation is inversely related to the degree that the response facilitates clear and direct communication. While the evaluative or advising response is the most frequent, it is the least facilitative of clear communication; and the understanding response, while the least frequent in everyday conversation, is the most facilitative. The evaluative response should be used with extreme caution, especially early in the helping relationship. It tends to make the sender defensive and takes the responsibility away from him and moves the focus from sender to responder. In some circumstances it can be appropriate -- if the sender asks the responder's opinion or if the responder wants to disclose his own values. The interpretive response moves the focus from the sender to the responder, is very often threatening, tends to intellectualize the conversation and, frankly, even in the hands of experienced therapists is often wrong. It can, however, provide new insights if used by a skilled helper. The supportive response shifts the feeling from the sender to the responder, minimizes feelings and often gives the sender the feeling the responder doesn't understand the problem or the feeling. It is perhaps appropriate if the person is in dire need of support or acceptance before he can carry on. The probing response limits areas about which sender can talk and moves focus from what sender wants to say to what responder wants to hear. However, it can prove to be very helpful in that it may provide a clearer definition of the problem and prevent the sender from avoiding meaningful topics. It also helps clear up misunderstandings that the responder may have. The probing response can be an extremely effective approach early in the interview. Since the job of the helper is to find out how the helpee sees the situation, it is important to get him to talk about things that he sees as important. The most useful type of probing response is the open-ended probe. An open probe may be best understood when compared with a closed questioning approach (referred to here as a "closed probe" even though technically this is not a "probe").

Open: "Could you tell me something about your problems with school?" or "How do you feel about being new to this school?"

Closed: "Do you plan on quitting school?" or
"Do you like this school?"

The open probe provides room for the helpee to express his real self without the imposed categories of the helper. The helpee can explore himself, can direct the conversation around his concerns, and in the process can clarify his concerns. The closed probe emphasizes facts rather than feelings, shuts off exploration, puts the helper in charge and most often produces a yes or no response.

Developing skill in formulating understanding responses is a basic focus of this counseling skills module. This is the response that Carl Rogers calls the "gateway to communication." The understanding response is particularly facilitative of helpful interpersonal relationships since it:

1. Leads to exploration of ideas and feelings.
2. Aids helpee in recognizing previously denied feelings.
3. Moves the conversation to more productive areas.
4. Corrects faulty meanings.
5. Shows interest and caring.
6. Is cathartic -- makes people feel better.
7. Helps person discover that his feelings are a positive part of life.
8. Fosters feelings of self-worth and acceptance.
9. Reduces threat or fear, person becomes less defensive.
10. Puts responsibility upon helpee.

Summarized by Project Ta-kós, 1990

HOW TO READ BODY LANGUAGE

By Flora Davis

. . . .Only a small part of the message comes across in words. Often the most interesting material gets there faster.

All of us communicate with one another nonverbally, as well as with words. Most of the time we're not aware that we're doing it. We gesture with eyebrows or a hand, meet someone else's eyes and look away, shift positions in a chair. These actions we assume are random and incidental. But researchers have discovered in recent years that there is a system to them almost as consistent and comprehensible as language.

Every culture has its own body language, and children absorb its nuances along with spoken language. A Frenchman talks and moves in French. The way an Englishman crosses his legs is nothing like the way a male American does it. In talking, Americans are apt to end a statement with a droop of the head or hand, a lowering of the eyelids. They wind up a question with a lift of the hand, a tilt of the chin, or a widening of the eyes. With a future-tense verb they often gesture with a forward movement.

There are regional idioms too: an expert can sometimes pick out a native of Wisconsin just by the way he uses his eyebrows during conversation. Your sex, ethnic background, social class and personal style all influence your body language. Nevertheless, you move and gesture with the American idiom.

The person who is truly bilingual is also bilingual in body language. New York's famous mayor, Fiorello La Guardia, politicked in English, Italian, and Yiddish. When films of his speeches are run without sound, it's not too difficult to identify from his gestures the language he was speaking. One of the reason English-dubbed foreign films often seem flat is that the gestures don't match the language.

Usually, the wordless communication acts to qualify the words. What the nonverbal elements express very often, and very efficiently, is the emotional side of the message. When a person feels liked or disliked, often it's a case of "not what he said but the way he said it." Psychologist Alberyt Mehrabian has devised this formula: total impact of a message = 7 percent verbal + 38 percent vocal + 55 percent facial. The importance of the voice can be seen when you consider that even the words "I hate you" can be made to sound seductive.

Experts in kinesics -- the study of communication through body movement -- are not prepared to spell out a precise vocabulary of gestures. When an American rubs his nose, it may mean he is disagreeing with someone or rejecting something. But there are other possible interpretations, too. Another example: when a student in conversation with a professor holds the older man's eyes a little longer than is usual, it can be a sign of respect and affection; it can be a subtle challenge to the professor's authority; or it can be something else entirely. The expert looks for patterns in the context, not for an isolate meaningful gesture.

Kinesics is a young science -- about 17 years old -- and very much the brainchild of one man, anthropologist Dr. Ray L. Birdwhistell. But it already offers smorgasbord of observations. (For example: eyebrows have a repertoire of about 23 possible positions; men use their eyebrows more than women do.) Most people find they can shut out conversation and concentrate on watching body language for only about 30 seconds at a time. Anyone can experiment with it, however, simply by turning on the television picture without the sound.

One of the most potent elements in body language is eye behavior. Americans are careful about how and when they meet one another's eyes. In our normal conversation, each eye contact lasts only about a second before one or both individuals look away. When two Americans look searchingly into each other's eyes, emotions are heightened and the relationship tipped toward greater intimacy. Therefore, we scrupulously avoid this, except in appropriate circumstances.

Americans abroad sometimes find local eye behavior hard to interpret. "Tel Aviv was disturbing," one man recalled. "People stared right at me on the street; they looked me up and down. I kept wondering if I was uncombed or unzipped. Finally, a friend explained that Israelis think nothing of staring at others on the street."

Proper street behavior in the United States requires a nice balance of attention and inattention. You are supposed to look at a passerby just enough to show that you're aware of his presence. If you look too little, you appear haughty or furtive; too much and you're inquisitive. Usually, what happens is that people eye each other until they are about eight feet apart, at which point both cast down their eyes. Sociologist Dr. Erving Goffman describes this as "a kind of dimming of lights." In parts of the Far East it is impolite to look at the other person at all during conversation. In England the polite listener fixed the speaker with an attentive stare and blinks his eyes occasionally as a sign of interest. That eye-blink says nothing to Americans, who expect the listener to nod or to murmur something -- such as "mmhmm."

There are times when what a person says with his body gives the lie to what he is saying with his tongue. Sigmund Freud once wrote: "No mortal can keep a secret. If his lips are silent, he chatters with his fingertips; betrayal oozes out of him at every pore."

Thus, a man may successfully control his face, and appear calm, self-controlled -- unaware that signs of tension and anxiety are leaking out, that his foot is beating the floor constantly, restlessly, as if it had a life of its own. Rage is another emotion feet and legs may reveal. During arguments the feet often tense up. Fear sometimes produces barely perceptible running motions -- a kind of nervous leg jiggle. Then there are the subtle, provocative leg gestures that women use, consciously and unconsciously.

Recent studies by psychologists suggest that posture often reflects a person's attitude toward people he is with. One experiment indicates that when men are with other men who they dislike, they relax either very little, or very much -- depending on whether they see the other man as threatening. Women in this experiment always signaled dislike with very relaxed posture. And men, paired with women they disliked, were never up-tight enough about it to sit rigidly.

Congruent postures sometimes offer a guide to broad relationships within a group. Imagine that at a party, guests have been fired up by an argument over student radicalism. You may be able to spot at a glance the two sides of the argument by postures adopted. Most of the pros, for example, may sit with crossed knees, the cons with legs stretched out and arms folded. A few middle-of-the-roaders may try a little of each -- crossing their knees and folding their arms. If an individual abruptly shifts his body around in his chair, it may mean that he disagrees with the speaker or even that he is changing sides. None of this, of course, represents an infallible guide, but is apparently significant enough to be worth watching for.

While children learn spoken and body language -- proper gestures, eye behaviors, etc., -- they also learn a subtler thing: how to react to space around them. Man walks around inside a kind of private bubble, which represents the amount of air space he feels he must have between himself and other people. Anthropologists, working with cameras, have recorded the tremors and minute eye movements that betray the moment the individual's bubble is breached. As adults, however, we hide our feelings behind a screen of polite words.

Anthropologist Dr. Edward T. Hall points out that, for two unacquainted adult male North Americans, the comfortable distance to stand for private conversation is from arm's length to about four feet apart. The South Americans like to stand much closer, which creates problems when the two meet face to face. For, as the South American moves in, the North American feels he's being pushy, and as the North American backs off, the South American thinks he's being standoffish.

The American and the Arab are even less compatible in their space habits. Arabs thrive on close contact. In some instances, they stand very close together to talk, staring intently into each other's eyes and breathing into each other's face. These are actions that Americans may associate with sexual intimacy and he may find it disturbing to be subjected to them in a nonsexual context.

The amount of space a man needs is also influenced by his personality -- introverts, for example, seem to need more elbow room than extroverts. Situation and mood also reflect distance. Moviegoers waiting in line to see a sexy film will queue up much more densely than those waiting to see a family entertainment movie.

George du Maurier once wrote: "Language is a poor thing. You fill your lungs with wind and shake a little slit in your throat and make mouths, and that shakes the air; and the air shakes a pair of little drums in my head . . . and my brain seizes your meaning in the rough. What a roundabout way and what a waste of time."

Communication between human beings would be just that dull if it were all done with words. But actually, words are often the smallest part of it.

Courtesy Glamour Magazine, Copyright 1969 by
Conde NAST Publications, Inc.

YOUR BODY AS A VEHICLE OF COMMUNICATION

What is much more important than a mechanical application of rules (for making sure you are physically present with parent) is to keep in mind that your body is always communicating messages to (parents), whether you want it to or not and whether you are aware of it or not. Effective helpers are, first of all, mindful of what their bodies are saying at any given moment - that is, they are in touch with and capable of reading their own nonverbal behavior during the interview. You can use your body as a kind of thermometer, reading in it your reactions to (parents). For instance, you may feel your muscles begin tensing as the (parent) talks to you. You can than say to yourself, "I'm getting anxious here. What is causing my anxiety?" Second, once you read these messages, you can use your body to communicate the messages you see as appropriate... If the (parent) says something that instinctively angers you, you can control your external expression of the anger (for instance, a grimace or frown) to give yourself time to reflect. Perhaps you heard the (parent) wrong or expressing anger toward the (parent) would simply not be helpful at this point.

Egan, The Skilled Helper, p. 62

INTERVIEWING CONCEPT

From Bailey - Family Focused Interview

1. Responding empathetically to family concerns
2. Following feelings expressed by family members
3. Probing for details in sensitive fashion
4. Utilizing both open-ended and closed-ended questions appropriately
5. Focusing in depth on issues of particular concern
6. Utilizing strengths to reinforce family members' efforts and provide a basis for suggestions
7. Summarizing topics discussed as well as future plans; and
8. Artfully blending all of these skills into a naturally flowing comfortable interview.

Parents as Partners
Alta Mira Specialized Family Services, Inc.

Adapted from Winton, P.J., & Bailey, D.B. (1988)
Journal of the Division for Early Childhood, 12 (3), 195-207.

SECTION III:

FAMILY-CENTERED PROCESS

* Partnerships, Collaboration And Goal Attainment Scaling

FAMILY-CENTERED PROCESS PARTNERSHIPS, COLLABORATION AND GOAL ATTAINMENT SCALING

WHAT YOU NEED:

INTRODUCTION

Handouts:

Building The Parent/Professionals Partnerships
Goal Attainment Scale
Mirror Model of Involvement

OverHeads:

Building of the Partnership
Goal Attainment Scale

Equipment:

Overhead Projector

Materials:

Balance Scale (the kind one would use in a classroom) with two sets of blocks, each set a different color

Supplemental Materials:

Mirror Model of Parent Involvement (Kroth, R.L., 1982)
Surveying a Program's Current Level of Family/School Involvement (Krehbiel, R., and Sheldon, M., 1985)

PARTNERSHIPS, COLLABORATION, AND GOAL ATTAINMENT SCALING

GOAL: To understand how to establish a relationship with families, based on mutual goals and expectations.

Our purpose is to present a framework for information sharing between parents and professionals that recognizes and appreciates the parent/professional roles in planning and decision-making for the child.

RATIONALE: "One partner cannot build the partnership by deciding what the other partner needs. For example, the negative assumptions held by professionals have often led to the development of models for family involvement that define the family as a recipent of goods/services offered by the schools without the family being involved in deciding what services should be offered, and how and when these services are offered." (Vincent, 1981, p. 2)

There is an assumption that an effective partnership will assure the child's program is stated and implemented in functional terms, that there will be continuity in what's expected of the child behaviorally. Both partners will be able to express their needs, perspectives and preferences.

OBJECTIVE 1

To recognize the essential features of a partnership.

The FACILITATOR uses a balance scale (one typically used in a classroom will work) to demonstrate the shifting of responsibility in a partnership. Label one side of the scale as **PARENTS** and the other side as **PROFESSIONALS**. Use two sets of blocks (each set of a different color) to show how professional and parent responsibilities have more weight at different times, such as:

> Parents' day-to-day information about their child (place a few blocks to parent side of scale)
>
> Professional information about children with special needs (add enough blocks to professional side of scale to make it slightly heavier)
>
> Parents preferred lifestyle (more blocks, making this side heavier)
>
> Professional skills and training (more blocks to balance scale)

POINT: Both sides of the Partnership have equal and important contributions to make. Neither side loses its investment.

OBJECTIVE 2

To recognize how **Partnerships** are built.

Give participants the **HANDOUT:** Building the Parent/Professional Partnership

Display the **OVERHEAD: BUILDING THE PARTNERSHIP** and discuss the points in the handout.

When discussing Stage II, the FACILITATOR will demonstrate how the balance scale changes as a result of how much information and skills the professional "gives" the parents. Start with equal blocks on the scale, demonstrating equal, but different knowledge of the child. Use the blocks to demonstrate how the parent side can carry more weight as the parent participates in the **"pooling ideas and exchanging information"**. Show how the parent may choose to tip the scales to their side at any time by using the following examples.

Example: The parent makes the decision to vary the strategies to accomodate a change in routine.

Example: The parent may learn everything she can about a particular disability and become the educator of the child's teachers on an ongoing basis.

POINT: The basic premise of a long term **partnership** is that the parent will be informed and therefore will make informed decisions. Informed consent is a process.

NOTE: Refer to **Listening and Interviewing** in the section called **"INTERPERSONAL COMMUNICATION"**.

OBJECTIVE 3

To learn how **Goal Attainment Scaling** can be used as a tool for **Collaboration.**

The FACILITATOR gives participants the **HANDOUT: Goal Attainment Scale** (adapted by Project Ta-kós from Carr, 1979).

Explain that the **Goal Attainment Scale (G.A.S.)** has two major purposes. The first is to help teach parents what **OUTCOMES** and **STRATEGIES** are all about. The scale is also used to monitor progress.

NOTES: The federal guidelines do not require that the **G.A.S.** be used; however, the State of New Mexico has placed an example of goal attainment scaling in the sample IFSP forms. The **G.A.S.** is suggested by Project Ta-kós for use as a tool for collaboration.

The **G.A.S.** adapted by Project Ta-kós is only one example of how this type of scaling may be used.

ACTIVITY:

A role-play should now begin between a parent and a professional, if possible. If no parents are available, then someone in the audience can role-play the parent. It is suggested that a parent be invited ahead of time to participate in this role-play (see section "Soliciting Parent Participation") and the FACILITATOR act as the case manager. If possible, the parent should be the same one who participated in the interviewing segment. If possible the **outcomes** identified during the interviewing demonstration should be used.

NOTE: If you are interviewing a new person, tell the audience that you are on "fast forward", that rapport has been established. State what the **OUTCOMES** are, either from the previous demonstration or make up some new ones with the parent. Arrange this before this segment begins.

The objective is to demonstrate how **strategies** for previously identified outcomes are created and evaluated. List the outcomes on the **G.A.S.** Ask parent what is the "worst" they would expect. Then move UP the scale. Ask clarifing questions, if necessary. Continue the interview until a couple of strategies are identified. These may pertain to one outcome or a strategy might incompass two outcomes. Ask the participants to list the strategies on a sheet of paper and to include this with the **outcomes** identified earlier.

Discuss the following:

1. the resources necessary to meet expected **outcomes** using examples from the role-play conducted above. Refer back to example of the families' strengths and preferences. Ask the parent to discuss how these **strategies** will work for her family.

2. the use of the **G.A.S.** as a method for developing **strategies.** Discuss the Pros and Cons.

Using the examples from the **G.A.S.**, discuss monitoring criteria and timelines. (Refer to P.L. 99-457 guidelines Johnson, B.H., McGonigel, M.S., & Kaufman, R.K., 1989). Ask participants:

How will the team know when **OUTCOMES** are achieved?

What will **SUCCESS** look like to the family?

OBJECTIVE 4 To learn about the **Mirror Model of Parent Involvement.**

The FACILITATOR creates a mini-lecture as an introduction to the Mirror Model of Parent Involvement. (See Mirror Model of Parental Involvement: Family Dynamics in the Background Materials section.) Give participants the **HANDOUT: Mirror Model of Parent Involvement** (Kroth, 1985).

Ask participants to review the handout briefly. Explain that the top half of the model addresses the needs that parents of exceptional children have; and the bottom half address the strengths that parents have. By showing various levels, some of the individual differences are reflected. Design of the parent program should reflect time and commitment directed toward the **all** and **most** levels, with selected activities for involvement at the **few** and **some** levels.

POINT: It is not a goal that parents move from one level to another. Rather, it is a goal to be sure that program staff can meet parents at any level and that time and resources are allocated to create a "goodness-of-fit."

ADDITIONAL ACTIVITIES

OBJECTIVE 5

To learn about the assumptions and rational for **The Mirror Model of Parent Involvement.**

The FACILITATORS creates a mini-lecture on the points made in the Mirror Model of Parent Involvement (Kroth, 1985) specifically on the assumptions or rationale for the model listed below. The fifth assumption regarding strengths and needs of parents will be covered during a later training sequence (See Family Strengths in Section IV).

Assumptions or considerations underlying the Mirror Model of Parent Involvement (Kroth, 1985)

Money

There will never be enough money to do all the things that parents want or professionals can deliver. Finances always force program personnel into choices. Producing videotapes for small groups would be nice, as would providing parents with take-home computers, but few districts can consider those possibilities.

A therapeutic parent group or counseling usually involves only a few parents and becomes an expensive component. In-depth services for small numbers are often the first things to go in times of a money crunch. Therefore, in developing services, this component must be placed in perspective. In some cases, referral to other community agencies is the best solution. Essentially it is a matter of spending the money where one can get the biggest payoff.

Time

Even if money were not an issue, time probably would be. There is seldom enough time to do what one knows how to do. Teacher time to prepare for interaction with parents and to actually call or interview parents is limited.

In most families, setting aside time for parent-child interaction means rearranging priorities. Most professionals think parents of handicapped children should do this, but it is not always practical, for a variety of reasons. The same challenge arises in suggesting that teachers or educators spend more time working with parents.

Personnel

These writers make the assumption that there are not - and probably never will be - enough trained people to facilitate interactions between parents and teachers and to train parents in strategies to work more effectively with their children.

This lack of training affects the type of services that can be offered in a community. If personnel are limited, one has to ask how the maximum benefit can be derived from these individuals. Guerney (1969) has proposed that professionals teach their skills to others, such as parents or other professionals, which has a multiplying effect.

Heterogeneity of Parents

Most professionals recognize that parents of exceptional children are not a homogeneous group. Still, this assumption is continually being violated by almost everything that is designed for parents. Teachers who are excellent at individualizing programs for children seldom individualize for parents.

At parent meetings it is not uncommon for someone to say, "The parents who should be here for this information are not here tonight." As Bridge (1976) noted, in addition to variables of ethnicity, religion, education, and income, a wide variety of attitudes, values, and child rearing practices must be taken into account. Some people have difficulty recognizing that not all people have the same priorities. Some parents are having a struggle to survive. (p. 6-8)

OBJECTIVE 6

To discuss the agency's level of parent involvement.

To discuss the agency's level of parent involvement.

Ask participants to complete the **HANDOUT: Surveying A Program** (Krehbiel, R., & Sheldon, M., 1985). Include the following points:

1. The structure of families today has changed considerably with huge increases in the number of working mothers. Attitudes have changed regarding gender behavior.

2. A commitment to family involvement which may benefit a child with special needs can place stress on a family.

3. Early childhood programs need to clearly define a philosophical basis for involving parents and siblings.

4. Early Childhood Programs must work within this model and tailor it to the individual needs and structures of all families involved.

The FACILITATOR asks participants:

1. How could this model be used within your agency?

2. What is currently in place at each level within your agency?

3. What could your agency implement easily to fill in any gaps?

Refer to the Mirror Model and remind participants of the percent of parents that may participate in any kind of activity which has been estimated by Kroth (personal communication) as follows:

ALL - 100%
MOST - 70% TO 80%
SOME - Over time is approximately 20%
FEW - 2% to 4%

TRAINING MATERIALS

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SECTION III:

FAMILY-CENTERED PROCESS

* Partnerships, Collaboration And Goal Attainment Scaling

Handouts:

Building the Parent/Professional Partnership
Goal Attainment Scale
Mirror Model of Involvement

BUILDING THE PARENT/PROFESSIONAL PARTNERSHIP

Stage 1 - Self-Directed Study

PARENTS ask:	**PROFESSIONALS ask:**
What does having a child with special needs mean to me as a **parent**?	What does having this child mean to me as an **interventionist**?
As the child enters a program the **PARENT** may engage in self-directed study gaining information from: pamphlets doctors other parents	As the child enters the program the **PROFESSIONAL** may engage in self-directed study to increase her understanding of the child's problems through information gained from: the family assessments/evaluations past experience with other families other professionals who know the child

Stage II - Enriching the Partnership

PARENTS ask:	**PROFESSIONALS ask:**
What can I learn from this professional about the special needs of my child?	What can I learn about this child's typical behavior?
As the partnership grows, the **PARENT**: expands vocabulary using professional terminology continues getting answers and support from other parents	As the partnership grows, the **PROFESSIONAL:** expands his knowledge of the family's "native language" increases their quality understanding of the child

Both PARENTS and PROFESSIONALS:

share information on practices and routines
ask questions
explore ideas
continue to increase awareness of the other partner
continue to increase their understanding of the child's problems

Stage III - Expanding the Partnership

PARENTS ask:	**PROFESSIONALS ask:**
What are the outcomes and strategies that will be useful to my child and family?	What are the outcomes and strategies that will fit with the family's priorities?
PARENTS apply their understanding of the professional's information in order to make decisions about developing a plan.	**PROFESSIONALS** apply their understanding of family's priorities and situation to guide decisions about developing a plan.
PARENTS may solicit help and support from: other family members other professionals written information other parents.	**PROFESSIONALS** make decisions about incorporating their expertise into the IFSP.

Both PARENTS and PROFESSIONALS:

pool ideas
exchange information
make decisions about intervention
develop the written plan
continue observations
participant in home/school conferences
use other professionals.

Stage IV - Implementing the Plan

When implementing the plan, **PARENTS:**

incorporate the strategies and skills into daily living

continue to make outcome and strategy decisions about how, what and when

When implementing the plan, **PROFESSIONALS:**

incorporate the strategies and skills into center-based activities as appropriate

continue on-going refinement and readjusting to child development and family development

Both PARENTS and PROFESSIONALS:

carry out the strategies independently and cooperatively
continue cooperative assessment of the plan
continue to gain information from home/school visits
continue observations
make notes of child progress and well being
measure parent and professional satisfaction
continue to ask:
    How are things going?
    What do we need to do differently?
    Do we need to change the plan?

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GOAL ATTAINMENT SCALE

Date: ____________ Child's Name: ____________________________

Date child entered program: ____________ Date of Birth: ____________________________

GOAL:	January, 1989 LEVELS OF GOAL ATTAINMENT	May, 1989 LEVELS OF GOAL ATTAINMENT
Child at beginning level of functioning	____	____
Less than expected outcome	____	____
Goal attained to satisfaction	____	____
More than expected outcome	____	____
Progress that would be above and beyond all expectations	____	____
Weight: 1-4 ____		
GOAL:		
Child at beginning level of functioning	____	____
Less than expected outcome	____	____
Goal attained to satisfaction	____	____
More than expected outcome	____	____
Progress that would be above and beyond all expectations	____	____
Weight: 1-4 ____		
GOAL:		
Child at beginning level of functioning	____	____
Less than expected outcome	____	____
Goal attained to satisfaction	____	____
More than expected outcome	____	____
Progress that would be above and beyond all expectations	____	____
Weight: 1-4 ____		
GOAL:		
Child at beginning level of functioning	____	____
Less than expected outcome	____	____
Goal attained to satisfaction	____	____
More than expected outcome	____	____
Progress that would be above and beyond all expectations	____	____
Weight: 1-4 ____		

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HOW TO COMPLETE THE GOAL ATTAINMENT SCALE

1. Fill in the date goals or outcomes were developed, the date the child was first enrolled in your program, child's name, and date of birth.

2. There are 4 spaces to record four goals/outcomes. Please write out each goal in total. Please note that these are goals or outcomes and not objectives designed to meet goals.

3. After each goal or outcome indicate a WEIGHT from 1 - 4 in terms of its relative importance to the other goals on the scale (r being the most important). If you think all goals will be given equal consideration during intervention, they may all have the same weight.

4. At the bottom of the page is a question that asks "Who weighted these goals?" Please circle all that apply.

5. Return the completed Goal Attainment Scale form to Project Ta-kós as soon as possible.

6. We will return this goal sheet to you mid-ear and at the end of the year. At that time you may indicate the level of the child's progress on the four goals and circle the correct response at the bottom right corner of the page which asks "who decided the level of goal attainment?".

THANK YOU VERY MUCH FOR YOUR TIME AND EFFORT!

Adapted by Project Ta-kós

MIRROR MODEL OF INVOLVEMENT

NEEDS			LEVEL
FEW (Approximately 5% of TOTAL school population	THERAPY - INTENSIVE EDUCATION AND SUPPORT	PROVIDE OR REFER TO COUNSELING GROUP THERAPY	4
SOME (Over time, approx. 20%)	SKILL TRAINING IN MANAGEMENT, INTERACTION WITH SCHOOL SYSTEM, CHILD REARING, INTERACTION WITH PROFESSIONALS	CONDUCT PARENT EDUCATION GROUPS, PARENT SUPPORT GROUPS; SIBLING SUPPORT GROUPS. UTILIZE NEWSLETTERS FOR EDUCATION	3
MOST (80%)	KNOWLEDGE OF CHLD'S PROGRESS, ENVIRONMENT, FRIENDS; ASSISTANCE IN PARENT/HOME PROGRAMS	UTILIZE NOTES HOME, DAILY/WEEKLY REPORTING SYSTEMS, CONFERENCES, NEWSLETTERS, PHONE CALLS, HOME VISITS	2
ALL	PARENTS AND CHILDREN'S RIGHTS, CONSENT TO TEST & PLACE, SCHOOL POLICIES AND PROCEDURES, SCHOOL & CLASS EVENTS	DEVELOP INFORMATION FLYERS, HANDBOOKS; ENROLLMENT DAY	1
ALL	SPECIAL KNOWLEDGE OF CHILD'S STRENGTHS & NEEDS, FAMILY CHARACTERISTICS AND ASPIRATIONS	PARTICIPATION IN INTAKE INTERVIEWS, QUESTIONNAIRES, ENROLLMENT, CONFERENCES	1
MOST	SHORT-TERM ASSISTANCE WITH PROJECTS AT SCHOOL, PROJECTS AT HOME, SPECIAL KNOWLEDGE OF THEIR OWN WORLD OF WORK	TELEPHONE FOR P.T.A.'S OR PARENT MEETINGS, ASSIST WITH MEETING ARRANGEMENTS, REINFORCE AT OME OR SCHOOL WORK, TALK TO CLASSES AT SCHOOL	2
SOME	HOME PROGRAMS WITH CHILD; LEADERSHIP SKILLS, WITH TIME, ENERGY AND SPECIAL KNOWLDEGE TO	INSTRUCTION FORM TEACHERS AND THERAPISTS, SERVE ON PARENT ADVISORY GROUP, VOLUNTEER IN CLASSROOM, FUNDRIASING ACTIVITIES	3
FEW	SPECIAL SKILLS, KNOWLEDGE, TIME, ENERGY AND COMMITMENT FOR LEADERSHIP TRAINING TO	LEAD PARENT GROUPS, WORK ON CURRICULUM COMMITTEES, DEVELOP PARENT-TO-PARENT PROGRAMS, SERVE ON BOARD OF DIRECTORS	4

STRENGTHS

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Adapted From R. Kroth, Communicating With Parents of Exceptional Children, 1985,
by Albuquerque Special Preschool c 1985.

SECTION III:

FAMILY-CENTERED PROCESS

* Partnerships, Collaboration And Goal Attainment Scaling

***Overheads*:**

Building The Partnership
Goal Attainment Scale

BUILDING THE PARTNERSHIP

STAGE I - SELF-DIRECTED STUDY

STAGE II - ENRICHING THE PARTNERSHIP

STAGE III - EXPANDING THE PARTNERSHIP

STAGE IV - IMPLEMENTING THE PLAN

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GOAL ATTAINMENT SCALE

Date: ____________ Child's Name: ____________________________

Date child entered program: ____________ Date of Birth: ____________________________

GOAL:	January, 1989 LEVELS OF GOAL ATTAINMENT	May, 1989 LEVELS OF GOAL ATTAINMENT
Child at beginning level of functioning	____	____
Less than expected outcome	____	____
Goal attained to satisfaction	____	____
More than expected outcome	____	____
Progress that would be above and beyond all expectations	____	____
Weight: 1-4 ____		
GOAL:		
Child at beginning level of functioning	____	____
Less than expected outcome	____	____
Goal attained to satisfaction	____	____
More than expected outcome	____	____
Progress that would be above and beyond all expectations	____	____
Weight: 1-4 ____		
GOAL:		
Child at beginning level of functioning	____	____
Less than expected outcome	____	____
Goal attained to satisfaction	____	____
More than expected outcome	____	____
Progress that would be above and beyond all expectations	____	____
Weight: 1-4 ____		
GOAL:		
Child at beginning level of functioning	____	____
Less than expected outcome	____	____
Goal attained to satisfaction	____	____
More than expected outcome	____	____
Progress that would be above and beyond all expectations	____	____
Weight: 1-4 ____		

SECTION III:

FAMILY-CENTERED PROCESS

* Partnerships, Collaboration And Goal Attainment Scaling

Supplemental Materials:

Mirror Model of Parent Involvement Family Dynamics
Surveying A Program's Current Levels of Family/School Involvement

from: Kroth, R., & Krehbiel, R., (1982), Unit 2, Mirror Model of Parent Involvement: Family dynamics, In R. Kroth & R. Krehbiel, (Eds) Parent - Teacher Interaction, (Available from The American Association of Colleges for Teacher Education (AACTE), Suite 610, One Dupont Circle, Washington, DC 20036.

MIRROR MODEL OF PARENT INVOLVEMENT

FAMILY DYNAMICS

Introduction

An analysis of family structures indicates that educators will have to consider a variety of ways of communicating with parents. For instance, the Superintendent of the Houston Public Schools reported that only about 7% to 17% of the children had a family structure with the father working and the mother staying at home, over 70% of the children had working parent(s), and over 50% of the children will have lived with a single parent by the age of 15. To hold conferences during the school day may mean that a parent will have to take time from work or not be able to come. Evening meetings may be poorly attended because parents are tired or they may be doing household chores, or they may prefer to spend the time with their children. Faced with the need to keep parents informed and complex family structures which makes communication difficult, educators will be challenged to design appropriate strategies for interaction.

The Mirror Model or Parental Involvement (Kroth, 1980)

The Mirror Model is an attempt to respect the strengths that parents have, as well as to acknowledge the needs they may have. It is also an attempt to respect the extent to which parents can become involved with the schools. Parents of handicapped children of any handicapping condition are not a homogeneous group. Some are wealthy, some are poor; some are highly educated, some are illiterate; some have time, some do not; some have strong family structures, some have fragile relationships; some have extended families, some have none, and some have many children, while some have only one. All of these factors will affect the amount and type of parental involvement.

The top half of the Mirror Model addresses the levels of need that parents may have. It assumes that professionals have knowledge and skills which parents need. The top half also assumes that not all parents will need, or be able to use everything at the same time. The bottom half of the model addresses the levels of strength that parents may possess. It assumes parents have knowledge and skills that professionals or other parents need. It does not assume that all parents will be able or have time to provide everything as outlined.

- -

Insert Fig. 1 Mirror Model about here

- -

Beginning at the midline and working in levels up the model, each level will be discussed briefly regarding the needs of parents.

MIRROR MODEL OF INVOLVEMENT

NEEDS	WHAT	HOW*	LEVEL
FEW (Approximately 5% of TOTAL school population)	THERAPY - INTENSIVE EDUCATION AND SUPPORT	PROVIDE OR REFER TO COUNSELING, GROUP THERAPY	4
SOME (Over time, approx. 20%)	SKILL TRAINING IN MANAGEMENT, INTERACTION WITH SCHOOL SYSTEM, CHILD REARING, INTERACTION WITH PROFESSIONALS	CONDUCT PARENT EDUCATION GROUPS, PARENT SUPPORT GROUPS; SIBLING SUPPORT GROUPS. UTILIZE NEWSLETTERS FOR EDUCATION	3
MOST (80%)	KNOWLEDGE OF CHILD'S PROGRESS, ENVIRONMENT, FRIENDS; ASSISTANCE IN PARENT/HOME PROGRAMS	UTILIZE NOTES HOME, DAILY/WEEKLY REPORTING SYSTEMS, CONFERENCES, NEWSLETTERS, PHONE CALLS, HOME VISITS	2
ALL	PARENTS AND CHILDREN'S RIGHTS, CONSENT TO TEST & PLACE, SCHOOL POLICIES AND PROCEDURES, SCHOOL & CLASS EVENTS	DEVELOP INFORMATION FLYERS, HANDBOOKS; ENROLLMENT DAY	1
ALL	SPECIAL KNOWLEDGE OF CHILD'S STRENGTHS & NEEDS, FAMILY CHARACTERISTICS AND ASPIRATIONS	PARTICIPATION IN INTAKE INTERVIEWS, QUESTIONNAIRES, ENROLLMENT, CONFERENCES	1
MOST	SHORT-TERM ASSISTANCE WITH PROJECTS AT SCHOOL, PROJECTS AT HOME, SPECIAL KNOWLEDGE OF THEIR OWN WORLD OF WORK	TELEPHONE FOR P.T.A's OR PARENT MEETINGS, ASSIST WITH MEETING ARRANGEMENTS, REINFORCE AT HOME OR SCHOOL WORK, TALK TO CLASSES AT SCHOOL	2
SOME	HOME PROGRAMS WITH CHILD; LEADERSHIP SKILLS, WITH TIME, ENERGY AND SPECIAL KNOWLEDGE TO ------------------------->	INSTRUCTION FROM TEACHERS AND THERAPISTS, SERVE ON PARENT ADVISORY GROUP, VOLUNTEER IN CLASSROOM, FUNDRAISING ACTIVITIES	3
FEW	SPECIAL SKILLS, KNOWLEDGE, TIME, ENERGY AND COMMITMENT FOR LEADERSHIP TRAINING TO ---------------->	LEAD PARENT GROUPS, WORK ON CURRICULUM COMMITTEES, DEVELOP PARENT-TO-PARENT PROGRAMS, SERVE ON BOARD OF DIRECTORS	4

STRENGTHS

ADAPTED FROM R.KROTH, *Communicating with parents of Exceptional Children*, 1985, by ALBUQUERQUE SPECIAL PRESCHOOL c 1985.

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Level 1. All parents need some basic information about their childrens' school and the programs involved. Level 1 addresses the knowledge that parents should have to exercise their rights and responsibilities.

Activities at this level often are handled too casually by teaches. "By the way, you'll need to sign this form before we can test your child", or "you may want to look over this handbook which explains our program". Follow-up surveys reveal that parents of handicapped children in particular have not been adequately informed about programs affecting their child (Dominguez, 1982). It would also seem that some school systems are apprehensive about informing parents about their role in consent to test, placement, educational programming and due process procedures. This is unfortunate because is school personnel do not do an adequate job, other organizations will, and this places professionals and parents in adversary roles.

Making sure that all parents have access to necessary information and that they understand it is a difficult task. Again, as regards special education the Federal Register and State Standards are not easy reading. As a result, many school districts have developed handbooks which answer parents' questions. Some school districts have developed workshops for parents on how to be active participants in the education programs (Kroth, 1979; Stevens, 1982). Special education teachers should be very knowledgeable of the laws and procedures concerning exceptional children so that they can answer questions with assurance and avoid the mystery and misconception that often accompanies this area.

All parents appreciate consistent information regarding school and class events. Teachers who keep parents informed on a regular basis will add a great deal to assure parental trust and acceptance of the school system.

Level 2. Most parents would like information about their child's progress and the school environment. There are many forms by which this can be transmitted. Some teachers prepare handbooks for their classrooms or they may use newsletters. Teachers also hold regularly scheduled conferences with parents to report progress.

Daily or weekly report card systems and telephone contacts an be used for the whole class, or just in special cases. "Good news" notes are among the most successful methods of establishing rapport with parents. Skills in holding conferences with parents regarding their child's progress are valuable and included as a separate unit in this module. Extensive practice in listening skills, and conflict resolution skills will be especially helpful for teachers.

Level 3. This strand seems to be the most popular among the professionals and in the literature and yet only some of the parents will elect to become involved. It is estimated that only 20 to 40 percent of the potential parent population will attend skill training parent groups at any given time.

This is an area where professionals tend to become "tunnel visioned" according to Dornberg (1978). If the professional has a behavioral orientation, then all parents are encouraged to learn behavioral techniques, or if the professional has acquired training in Parent Effectiveness Training (Gordon, 1975), then all parents are offered training in this strategy.

There are probably an infinite number of parent group programs that could be designed to fulfill the expressed needs or anticipated needs of parents. A school psychologist skilled in group process can design or help a teacher design any number of programs (Kroth & Scholl, 1978). In addition to the more traditional or "canned" programs, there are programs designed to teach parents to test their own children, make nutritional snacks, to make puppets to increase language, to teach toileting, to teach assertive techniques, to teach parents how to help make the transition to elementary school, midschool, or high school, to explore vocations, and in the case of exceptional children, to each parents to write their own Individual Education Plans.

Quite often the teacher has established a good relationship with parents and therefore has an idea of the desired content for workshops. This module is not designed to incorporate any one type of parent education group in detail. The teacher interested in becoming involved at this level should study the various approaches and call upon school and community psychologists, counselors, nutritionists, therapists, etc., to assist in implementation.

Level 4. Even if the activities described in the first levels are carried out in a systematic way, a few parents will probably need in-depth training, or therapy. The school psychologist is in the best position to provide this service, or to serve as a referral person to the appropriate agencies.

It is highly probable that many of the anxieties and feelings of guilt can be alleviated by information, knowledge and skills which are provided in Levels 1, 2, and 3. It is also possible that a skilled teacher will be able to identify parents in these levels who are going to need a different program. They may be parents who are emotionally drained and whose coping skills are depleted. Individual counseling or the formation of support groups led by trained personnel could be made available.

Starting at the midline and going down the model in Figure 1, are levels of strengths, or areas in which parents can contribute to a comprehensive parent involvement program. Parents have information, knowledge and skills that can be useful to professionals as well as to other parents.

Level 1. All parents know things about their children that professionals need to know. This may be such things as what is reinforcing to the child, or how the child learns best, or a variety of developmental milestones. In the case of exceptional children, much of this information is obtained formally through a case history which is usually taken when a child is being considered for a program.

School districts vary as to who is responsible for taking the case history. It may be the school psychologists, a school social worker, a special education coordinator, or teacher. If this activity is not coordinated, the parent may be placed in the position of repeating the same information many times. It is desirable for the people who need family information to get together and develop a form which would include all of their needs and yet not impinge on the rights of the parents or children involved.

Aside from special education, many regular school teachers are pleasantly surprised to learn simple techniques from parents that help make a child's day go smoothly. Regular teachers should learn to ask parents how they think the child will be most happy in a classroom.

Level 2. Most of the parents will be willing and able to give some additional help on a short term basis or which do not take them out of the home. They may be willing to reinforce at home what goes on in the classroom if the teacher is using a daily-weekly reporting system. They may be willing to supervise their child's homework assignments.

Most of them will be willing to serve on telephone calling committees or help with field trips if these events do not occur too often. Some parents will be willing to talk to a class about vocations and the world of work. Others will be willing to tutor in the classroom occasionally.

Coordinating these short term activities takes time. It involves matching parent strengths with educational and professional needs - usually on a short term basis.

Level 3. Some of the parents will have the time, strength, knowledge, and skill for a more concentrated commitment. Because parents are a heterogeneous group, some might be professionals with leadership training.

Advisory groups can be an important asset to special education programs (Kroth & Scholl, 1978). Unfortunately, parent participants often are not given any training in the roles that they assume. In most organizations, newly elected officers are offered some leadership training. This often does not happen in public school advisory groups. As a result, school administrators take on the leadership roles and parents may feel used rather than being contributors. Teachers are advised to suggest that someone be called in to train parents in leadership and management skills.

Task force groups are another way of using parents to assist in problem solving. Here, again, it is important that the mission of the task force is clearly defined. Most people do not mind contributing time and effort to problem solving activities if they feel that the products that emerge will be useful and used.

Parents in the business world can be quite helpful in curriculum recommendations for students in vocational programs. Most parents, if given a little training or orientation area very helpful as classroom volunteers and newsletter contributors. Where appropriate, parents are a major asset for fund raising.

Level 4. A few parents will have the time, strength and ability to implement parent to parent programs and parent groups. They might serve as advocates for other parents. The training sequence for becoming a group leader is somewhat lengthy. First, the parent might go through a skills training program as a participant. If, for instance, it is a behavior management program, the parent would demonstrate the ability to take data and modify behavior. Second, the parent would act as an assistant to the professional group leader. At this stage, the parent would learn to use the equipment, offer assistance to parents and observe the leader. After the sessions, the leader and parent together critique the delivery of the workshops. In the third phase, the parent takes the leadership role and is assisted by the parent trainer. Every time the parent goes through the program, it increases the number of cases and examples the parent can draw from future groups. The parent can then help teaches who would like to implement parent groups in their schools.

HANDOUT: Surveying a Program's

SURVEYING A PROGRAM'S CURRENT LEVELS OF FAMILY/SCHOOL INVOLVEMENT

The following survey is designed so that programs can determine which levels of involvement they currently make available to families. Make a check mark beside each activity or material offered at your school.

LEVEL I - FAMILY INVOLVEMENT ACTIVITIES

	Offered Activities
*Preenrollment "Familiarity Letters"	____
*Preenrollment Packet of Necessary Forms"	____
*Preenrollment notice	____
Handbook describing how to complete forms	____
*Enrollment Day	
Contact with staff including secretary	____
*Handout explaining I.E.P.	____
*I.E.P. Conference	____
Home Visit	____
Pamphlet: Keeping a file on your child	____
*School Handbook	____
Phone Conversations (including invitations, etc.)	____
Handbook/handouts explaining PL 94-142	____
Other______________________	____

LEVEL II - FAMILY INVOLVEMENT ACTIVITIES

*Phone Calls	____
*Spontaneous Notes	____
*Daily/Weekly/Monthly Reporting Systems	____
Other material sent home (Newsletters)	
*Daily	____
Bi-weekly	____
Weekly	____
Monthly	____
Occasionally	____
Orientation	____
Fundraiser	
Baked goods, Ticket sales	____
2 hour help during an event	____
Christmas Party Attendance	____
Volunteer Appreciation Luncheon Attendance	____
End of the Year Picnic	____
Other______________________	

*Samples or explanations given in Krehbiel and Sheldon, 1985.

Sample Survey (Continued)

LEVEL III - FAMILY INVOLVEMENT ACTIVITIES

	Offered Activities
Parent Association Meeting	____
Fundraising	
Arts & Crafts Projects	____
Preparation	____
Assistant Chairmenships	____
Home follow through	
from classroom	____
OT	____
PT	____
Speech	____
Counselor	____
Field Trips	____
Swimming Aide	____
Occasional Classroom Aide	____
Make/collect material for classroom	____
Room Parent	____
Sibling Groups	____
*Write Letters or call legislators	____
Clothing exchange at school	____
Family Stress Index (or other forms)	____
Other____________________	____

Sample Survey (Continued)

LEVEL IV- FAMILY INVOLVEMENT ACTIVITIES

	Offered Activities
Monthly Parent Groups	____
Special Training or Educational Workshops	____
Regular classroom aide (2-3 hours per week)	____
Plan menus/prepare special snacks	____
Choose childrens books from public library	____
Sharing of parent special skills and talents with children	____
Buying for snack program	____
Participation in workdays	____
Help with Parent Library	____
•Help with PARENT PRESS or School Newsletter	____
Carpool organization	____
Involvement with Buddy System (Calling a family on the waiting list or a family going through a particularly hard time such as hospitalization of a child)	____
Coordinator of a Parent Area	____
Involvement with organizations such as PRO (Parents Reaching Out); CEC (Council for Exceptional Children); AARC (Albuquerque Assoc. for Retarded Citizens)	____
Speaker on parent panels	____
Board Member	____
Fund Raiser Overall Chairperson	____
Help organize Volunteer Appreciation Luncheon	____
Help organize Grandparent's Day	____
Legislative Lobby	____
Other________________	____

Albuquerque Special Preschool, 1985

SUMMARIZING YOUR PROGRAM'S FAMILY/SCHOOL INVOLVEMENT SURVEY

1. List the "offered" family involvement opportunities
   a. Is the staff satisfied with the list? That is, can any improvements be made?
2. List not offered, but might-like-to-offer, programs. Beside each item consider:
   a. Who would be the probable staff member(s) who could handle this activity or event.
   b. Can some items be carried out by "outside" community agencies.
   c. Prioritize the list.
3. Eliminate all family involvement activities the staff feels unreasonable, those that will over-burden particular staff members, those where no trained personnel are available.
   a. Keep in mind that there are a few parents every year who can carry out certain activities and appreciate the opportunity to do so.
   b. Some activities may have been attempted in the past with little or no participation. Before eliminating those activities the staff should discuss why it failed and where changes could be implemented. Remember, only 5% - 20% of families in the school will have the energy, time, or interest to become involved in Levels III and IV. Therefore a seemingly low turn out, say 3 parents, or an educational workshop, may have been reasonable.
4. Establish procedures, time lines, reasonable percent participation goals for each activity on the list.
5. Discuss ways to evaluate programs.
6. Prepare a Needs (or Wants) Assessment to be sent to parents. Include parents on the committee which is to write-up the assessment.
7. From your final list of Family Involvement Activities write in (again estimate) the amount of time a parent might spend should he/she actually participate in all activities. This will help your program realize that the extent of involvement may indeed be very high already!

Albuquerque Special Preschool, 1985

SECTION IV:

UNDERSTANDING FAMILY VARIABLES

* Self-Awareness: Roots of Beliefs and Values

* Family Style

Life Events

Family Support Networks

Family Strengths

* Self-Awareness: Teaching Styles

UNDERSTANDING FAMILY VARIABLES

WHAT YOU NEED:

Handouts:

Family Support Scale (Dunst, C.J., Jenkins, V., & Trivette, C.M., 1984)
Qualities of Strong Families (Dunst, C.J., Trivette, C.M., & Deal, A.G., 1988)

Send these to participants to complete prior to the workshop:

The Roots of Belief and Values (adapted from Kluckhohn, F., & Stradtbeck, F. 1961)
Inventory of Family Life Events
Family Life Cycle Stages (Carter, D. & McGoldrick, M., 1980)

Send to the parent who will participate in the role-play activity prior to the workshop:

Alta Mira Survey of Strengths and Needs

OverHeads:

Life Cycle Stages

Additional Activities:

Handout to be sent prior to training

Teaching Style Inventory (Northwest Regional Education Laboratory, 1978)

SELF-AWARENESS: ROOTS OF BELIEFS AND VALUES

GOAL: To recognize how **beliefs** and **values** shape everyday behavior.

RATIONALE: The following quote from Benjamin, 1981 serves as a rationale:

> Unless confronted by **values** different from our own; unless called upon to defend and justify ours, we tend to take them for granted and their propriety as obvious. (p. 54).

NOTE: An excellent activity to introduce this section is to have participants complete and discuss the Learning Style Inventory. (McBer, 1976). This instrument, developed by David Kolb provides individuals an opportunity to look at one's own learning style and to appreciate diversity in the learning styles of others. All adults, parents and staff, bring different learning styles to any given situation. A learning style is an individual's characteristic way of feeling, believing, and processing information in learning situations. Learning styles accentuate the role of individual differences.

A training objective and a portion of the inventory can be found in the Background Section. The complete instrument can be purchased from the publisher:

McBer and Company
137 Newbury Street
Boston, MA 02116

OBJECTIVE 1

To recognize how out of awareness learned preferences effects daily activities.

The FACILITATOR should give out the **Handout: The Roots of Beliefs and Values (author unknown)** prior to the workshop if possible

NOTE: This instrument was adapted by Project Ta-kós. The original instrument was based on seminal work by Kluckhohn, F. & Stradtbeck, F., (1961). Their work can be found in the book entitled Mirror for Man. The complete reference is contained in the reference section.

This activity demonstrates how certain concepts shape a person's beliefs and values. Give participants a few minutes to complete or review the instrument. Ask participants to share their response to the items. Generate a discussion around the differences between views of the staff members. Point out how these aspects of our lives are experience. Give examples of how our "preferred way of doing things" effects our interactions.

For example:

> Our work reflects one orientation to time. We are to arrive at work on time and we rely on calendars and clocks to maximize our use of time. Time is like a commodity. When people are late to a meeting, we begin to worry about what might have held them up. Others may not view time as "fixed" nor does it refer to duration, it is a characteristic sequence of events. It is what happens when the corn matures or when a sheep grows up. A 24-hour period can be experienced a s a self-paced series of events or a planned scheduled.

Think about and discuss why it takes a child so long to learn time. The following quote from Hall (1973) can be used as an example:

> Almost anyone can recapture that moment of his childhood when the day was almost spent and Mother was asked, "Mommy, how long will it be before we get home? I'm tired." And Mother replies, "just a little while, dear. Now you just be good and before you know it we'll be home." "How long is a while?" "It's hard to say, dear." "Is a while five minutes, Mommy?" "Sometimes, dear, but not always. In this case it will be a little longer than five minutes." "Oh." At this point the child gives up - for the time being at least (p. 141-142).

The following is an example of an interaction between two people who experience time differently. It is a first-hand account as reported by a student.

> "A fellow student of mine was from Mexico. She had been working very hard to learn English and the cultural way s of America. She and I had planned to meet to study together. That day, I was behind in everything and arrived at our schedule meeting place about 10 minutes late, thinking that she, being from Mexico, would probably be late anyway. I waited for about the amount of time one would normally wait but decided to wait even longer, once again remembering that in her background it would not be unusual for her to be 30 minutes late. Finally, I gave up and left. Later, she told me that she had arrived on time. Having observed that American's value every minute, she had been working very hard to reorient her concept of time to match her new American friends. After about 10 minutes, she figured that I either wasn't coming (since Americans aren't late) or that she had missed me altogether.

POINT - Many preferences are learned overtime and may permeate all our daily activities. these are, usually, out of our awareness. For example, in the case of "time", we cannot "step into the other person's shoes', but we can become aware that a difference exists and adjust our expectations.

FAMILY STYLE:

LIFE EVENTS, FAMILY SUPPORT AND FAMILY STRENGTHS

GOAL: To become knowledgeable about aspects of family styles (life-ways), strengths and needs that families share.

RATIONALE: By understanding a **family's style**, a service provider can work more closely with the family in order to assure 'goodness-of-fit' (Thomas & Chess, 1977). Bailey, et. al stated the following in regard to goodness-of-fit: "Application of the goodness-of-fit concept to the study of families in early intervention programs seem appropriate because the concept permits consideration of the unique idiosyncratic characteristics of child and family as they interact with the demands, expectations, and/or opportunities of the environment". (1986, p. 83).

POINTS:

- "Recognizing and respecting the individuality and **strengths** of families will only serve to strengthen the family's self-confidence and to provide a strong framework for parents and professionals to work together" (Shelton, Jeppson, & Johnson, 1987).
- It is important to be able to recognize a family's **preferred way of doing things.**

NOTE: It is recommended that the majority of this material be shared with the participants at the "teachable" moment. Teachable moments will occur during demonstration, role-play and on-site.

OBJECTIVE 1

To learn about family styles or "preferred ways of doing things"

The FACILITATOR gives a MINI-LECTURE on **FAMILY STYLE** including the following points:

Family Style refers to a family's "preferred way of doing things". It includes:

How you do things
How you make decisions
How you conduct your daily life
How you choose to live.

Ask participants to think about their family's "preferred way of doing things" and then discuss the following scenario:

> Your best friend is hospitalized suddenly. What steps would you take to help her?

Stop the discussion after several people have given three or four steps they would take. Point out the variety of ways people respond. Ask participants to share their rationales for some of their actions. After several people have talked the FACILITATOR may ask the participants:

1. Who's the spokesperson?
2. What attitudes about healing did you hear?
3. What did you hear about future or present orientations? For example, did anyone talk about steps that would help their friend in only present terms? future terms?
4. How were events timed? Did some people place a priority on certain events while others saw a different event as more important?

Discuss how these are "preferred ways of doing things." Ask participants how they "knew" how to respond. Suggest that one's style is a result of unique learning and experiences and may be dependent on:

- our beliefs and values (cultural style),
- the environment (psychosocial),
- life events, and
- our strengths.

In addition, available resources, family strengths, family developmental events, and unique events specific to the family affect life ways.

Carl Dunst refers to a **Family Functional Style**. He suggests this to be a "combination of qualities (which) appear to define strong families, with certain combinations defining unique family functioning styles" (1988). These qualities will be discussed in the objective 5 of this section **Family Strengths**.

Explain that professionals learn about each family's **Style** through observation, rapport building, interviewing and visiting.

POINT: No two families are alike, they are not homogeneous; therefore there is no one solution to a given problem.

OBJECTIVE 2

To recognize how various life events or major changes can effect family functioning.

The FACILITATOR asks participants to complete **HANDOUT: Inventory of Family Life Events** prior to the workshop, if possible. Ask participants to share their thoughts about completing the inventory. Discuss the fact that these are **situational life events**. They can occur during any **life cycle** stage.

Life events are events that may be developmental or situational occurrences that most individuals encounter during a life time. The FACILITATOR should display **OVERHEAD: Life Cycle Stages** and give participants **HANDOUT: Family life. . .** (Carter, D. & McGoldrick, M., 1980). This overhead shows major developmental stages. Go through each stage and discuss the attitudinal changes required. Ask the audience to think about developmental experiences they have had. Have several people share and discuss this event.
Ask Audience:

1. Why do these events come to mind so quickly?
2. Think of stages you have not experienced (for example: marriage). How does this affect your ability to identify with those who have?
3. How does this relate to **family style?**

POINT: A person's **life-stage** can't be taken for granted - it's too rich in experiences and memories.

POINT: The more social or situational **life events** that require a family's "energy" the more the **events** affect their ability to focus on one area, such as the child with developmental disabilities. It is important for service providers to be aware of ENERGY DRAIN at certain points in the family's development so expectations can be adjusted.

OBJECTIVE 3 To recognize the importance of a family's social support system.

Goldfarb, Brotherson, Summers, and Turnbull (1986), suggest that social support is one of the very best coping methods available to families of special children. A good **social support network** can provide 3 types of help to a family:

1. material support (goods, services, financial assistance)
2. emotional support (people who make us feel valued and esteemed; give us a sense of belonging)
3. referral and information (not necessarily advice!)

The FACILITATOR asks participants to make a list of friends, relatives, neighbors, co-workers, etc. and to complete the **Family Support Scale** (adapted by Project Ta-kos from Dunst, Jenkins & Trivette, 1984). Ask participants to share their reactions. After a period of time, begin to move the discussion to focus on why it may be difficult to develop and keep support networks. Ask participants about experiences in developing **social networks**.

Ask participants to share their answers to the following questions. (Tell them that they do not have to volunteer to answer).

What was it like to complete the scale?

What did you learn about your own support networks?

How does one's support network relate to one's style?

How would one's support network change through the life cycle?

Continue discussion on these questions until several points have been made. Throughout the discussion, cover the following:

1. Families differ in the size of their support networks.
2. Families and individuals differ in the helpfulness of their support network.
3. A family's support networks change or shift in conjunction with life cycle events.

After an appropriate amount of time, give a mini-lecture on roadblocks to developing and keeping **support networks**. These may include:

> Limited time - an issue for all families, but families with a special child have to devote extra attention to the special child which doesn't leave extra time for developing friendships. Beyond that, it is always hard for everyone to find people who share common interests.
>
> Stigma - some families avoid building and using social support because they fear social rejection.
>
> Loss of privacy - people may hesitate to confide in others. Sometimes the loss of privacy can make people feel a loss of personal dignity.

Families are comprised of individuals who have various strengths and styles which are woven together all adding up to create a family's style. If we view families from this perspective, we can begin to see the wide array of possible differences among families. Our services must , therefore, be flexible so we can provide options to meet individual needs. Our services should be supportive and should consider a family's strengths, time availability, energy and preferences. Goldfarb, Brotherson, Summers, and Turnbull state this best. "The most obvious resources in your family come from the individual strengths of the people in it". (pg. 29).

OBJECTIVE 4

To learn about one assessment procedure and to understand what constitutes family strengths.

The FACILITATOR discusses the purpose of using a **strengths and needs survey**. Include the following:

1. To address concerns - which may or may not become an identified need in the IFSP.
2. To prioritized those concerns that arise during discussion (that a family wants to be included in the IFSP).

3. To identify child and family strengths. However, strengths will surface more naturally and be better identified as families begin to help carry out objectives.

4. To help parents organize their thoughts. However, there are many parents who do not like to read and fill out structured instruments and prefer "to tell their story."

5. To help create a goodness-of-fit when developing strategies because the service provider, as a good listener, has learned something about the family's style -- their preferred ways of doing things.

The FACILITATOR gives out and discusses the **HANDOUT: Qualities of Strong Families.**

Dunst, Trivette, and Deal (1988) summarize literature on **strengths of families**, which they called: **Qualities of Strong Families**. It is the combination of these that make up a family's functional style. The major points they made were:

1. Not all 12 qualities are present in what "experts" call strong families.

2. Strong families are characterized by a combination of qualities.

3. Family strengths and capabilities represent family resources that are used as one way to meet needs.

4. Families also use their capabilities and strengths to mobilize outside resources.

In the same article Dunst, Trivette and Deal (1988) describe the twelve qualities as:

1. a belief and sense of commitment toward promoting the well-being and growth of individual family members as well as that of the family unit;

2. appreciation for the small and large things that individual family members do well and encouragement to do better;

3. concentrated effort to spend time and do things together, no matter how formal or informal the activity or event;

4. a sense of purpose that permeates the reasons and basis for "going on" in both bad and good times;

5. a sense of congruence among family members regarding the value and importance of assigning time and energy to meet needs;

6. the ability to communicate with one another in a way that emphasizes positive interactions;

7. a clear set of family rules, values, and beliefs that establishes expectations about acceptable and desired behavior;

8. a varied repertoire of coping strategies that promote positive functioning in dealing with both normative and non-normative life events;

9. the ability to engage in problem-solving activities designed to evaluate options for meeting needs and procuring resources;

10. the ability to be positive and see the positive in almost all aspects of their lives, including the ability to see crisis and problems as an opportunity to learn and grow;

11. flexibility and adaptability in the roles necessary to procure resources to meet needs;

12. a balance between the use of internal and external family resources for coping and adapting to life events and planning for the future.

The FACILITATOR asks participants to refer back to the **HANDOUT: Qualities of Strong Families** (Dunst, et. al., 1988) and discuss how families meet their needs through mobilizing their own resources.

ACTIVITY: The FACILITATOR will role-play with a "parent" using the Alta Mira Survey of Family Needs. It is suggested that the FACILITATOR arrange for a parent to participate in an interview demonstration (see Preparation for Training: Solicitating Parent Participation and section II on Interviewing). If this is not possible, ask for a volunteer to participate in the role-play activity as the parent to determine family needs, and to prioritized those needs. (The Survey should be completed by the parent prior to the training.)

NOTE: For ease of demonstration and concern for time, this role-play centers around a **strengths and needs** written survey. The same information can be gathered, over time, using good interviewing techniques. (See Section II)

Hints for the FACILITATOR

1. During role-play, choose only a few items from the Survey.
2. Include examples of both **strengths and needs.**
3. Try to show how an item circled 3 - (concern) can become a 1 (no concern) which demonstrates why the instrument cannot always be taken at face value.
4. Try to show how a 3 (concern) is truly a concern to the family - but the family does not want the program to intervene. Example:
   Head of household has lost job - family does not expect program to do anything but to be aware that this is causing stress.
5. Be sure that the parent in the role-play knows to demonstrate the above points.
6. As you begin to prioritized, use open ended questions such as:
   (Hypothetical) If you had to narrow these down to 5 or 6 needs, which would you choose? or If our agency were to give you any help you wanted, what would you ask for?
7. Try and have one "family related" outcome. For example: The family would want to know what to say to siblings and relatives about the child with special needs.

DISCUSSION

After an appropriate time, stop the role-play and ask:
- What **strengths** did you hear?
- What did (the parent) say about their "preferred way of doing things"?

The FACILITATOR asks the audience, "Suppose a parent says, 'Just do everything you can for Janie.' How would you respond to this comment."

Possible Response:
We will do everything that we know to do -
we'll keep you informed at every step.

POINT: Parents may have said this 1) because they don't know what to ask; 2) because they are still unsure about what the professional can do or expects - therefore the parent does not elaborate.

SELF-AWARENESS and TEACHING STYLES

GOAL: To look at one's own teaching style and to increase one's effectiveness for working in harmony with families.

RATIONALE: In early childhood intervention the professional is asked to share expertise with families, allowing families to assimilate the knowledge into daily routines and every day life. The amount of autonomy exercised by the learner is congruent with that required by the mode or method used by the teacher (Smith, 1982) How families receive and use information depends on how it is presented by the professional.

POINT: "Strength and well being comes not just from our commonness, but also from our uniqueness. We can identify and maximize our skills in a way that also promotes and supports the skills of others."

OBJECTIVE 1

To look at one's own teaching style and how it affects interactions with parents.

ACTIVITY AND DISCUSSION:

Complete the Teaching Style Inventory (author unknown) and share results with the group. Discuss the implications for working with parents.

TRAINING MATERIALS

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SECTION IV:

UNDERSTANDING FAMILY VARIABLES

* Self-Awareness: Roots of Beliefs and Values
* Family Style
Life Events
Family Support Networks
Family Strengths
* Self-Awareness: Teaching Styles

Handouts:

The Roots of Belief and Values (Kluckhohn, F., & Strodtbeck, F. 1961)
Family Support Scale (Dunst, C.J., Jenkins, V., & Trivette, C.M., 1984)
Qualities of Strong Families (Dunst, C.J., Trivette, C.M., & Deal, A.G., 1988)
Inventory of Family Life Events
Family Life Cycle Stages (Carter, D. & McGoldrick, M., 1980)
Alta Mira Survey of Strengths and Needs

THE ROOTS OF BELIEFS AND VALUES

Consider the following concepts that have probably shaped your beliefs and values. What do you believe? What happens when your beliefs and values are in contrast with someone else?

* What is most valued and respected in individuals?

(1)	(2)	(3)
The skills they've developed and their achievements in life.	Their background in terms of membership in a particular family or tribe.	Their spiritual qualities or relationship to the Supreme Being.

* What role does fate play in an individual's life?

(1)	(2)	(3)
Fate is not important; the individual is master of his own destiny.	Fate plays a role, but the individual has some control of his own destiny.	Fate controls the life of each individual, who can do nothing to influence it.

* How do individuals primarily learn about life?

(1)	(2)	(3)
Through their own efforts and experience; through trial-and-error learning.	From older, wiser, or more experienced people.	Through revelation by the Supreme Being or His prophet here on Earth.

* What is the principal way people think and make decisions?

(1)	(2)	(3)
People make decisions using factual evidence and rational or logical thought processes.	People make decisions on the basis of intuition (inner knowledge).	Decisions are ruled by their emotions.

* To what extent are individuals capable of change of growth?

(1)	(2)	(3)
They are capable of great growth, change, and improvement.	They are capable of growth and change to a limited extent.	They are believed to exist in an unchanging state.

* How do personal disagreements and conflicts tend to be handled?

(1)	(2)	(3)
People in disagreement usually try to work out their differences face-to-face or through other direct contact with each other.	Go-between (intermediaries) are frequently used by people attempting to resolve a conflict.	Conflicts and disagreements between people are ignored or suppressed as much as possible.

* What is the primary time orientation of the society?

(1)	(2)	(3)
The future is of primary interest and importance.	The present is of primary interest and importance.	The past is of primary interest and importance.

* What is the preferred type of social interaction?

(1)	(2)	(3)
People tend to be active, doing things together, to keep up a rapid pace, and to talk a great deal.	People tend to interact as described in (1) on some occasions, and as described in (3) on other occasions.	People prefer being together, interact slowly & passively, and are comfortable with periods of silence.

* How binding are roles and obligations within the family?

(1)	(2)	(3)
No fixed roles or responsibilities are associated with family membership; members contribute (or not) according to their interests and abilities.	Some roles and obligations go with family membership (and tend to be linked with age and sex), but these are general in nature & not flexible.	Specific duties and responsibilities are linked to one's sex and relative age within the family.

* What is the preferred pattern of family relationships?

(1)	(2)	(3)
Strong obligations are felt primarily within the "Nuclear" family unit (parents and children); nuclear living arrangements are preferred.	Strong obligations are felt within the "extended" family which usually lives together or in close proximity.	Obligations and ties to both living and dead members of the extended family are strong; and extended family usually lives together or in close proximity, and all remain highly conscious of their ancestors.

* How is time defined and valued?

(1)	(2)	(3)
Time is sensed to pass quickly, and this is hard to accept calmly; it is valued as a limited resource not to be wasted.	The passage of time is sensed; there is little or no feeling that time can be wasted.	There is little or no consciousness of the passage of time; time is unlimited.

This instrument was adapted by Project Ta-kos. The original instrument was based on seminal work by Kluckholn, F. & Strodtbeck, F., (1961). Their work can be found in the book entitled Mirror for Man. The complete reference is contained in the reference section.

INVENTORY OF FAMILY LIFE EVENTS

Please check the following events that made you worry WITHIN THE LAST SIX MONTHS.

CHECK: EVENT

____ 1. My family has less money.

____ 2. Someone has moved in or out of our home.

____ 3. I received new medical/diagnostic/educational information about my child.

____ 4. My child with special needs made major unexpected changes.

____ 5. My family moved.

____ 6. I (or my spouse) stopped working/or changed jobs/or started school.

____ 7. A family member, close relative, or close friend died.

____ 8. I have separated/divorced/or started a new relationship.

____ 9. My child with special needs is expecting or had a medical operation.

____ 10. A family member, relative or close friend became seriously ill.

____ 11. My child changed programs, or entered public school for the first time.

____ 12. Something happened with another child in the family.

____ 13. There is a new child in the family.

____ 14. There was a change in child care.

____ 15. My child should be walking, talking, toilet trained, or feeding himself alone, but is not.

____ 16. My child's eating has changed.

____ 17. My child's sleeping has changed.

___ 18. Other (explain):

Adapted by PROJECT TA-KÓS, 1988 from McCubbin, H.F., Patterson, J.M., & Wilson, L.R. (1981)

FAMILY LIFE CYCLE STAGES

STAGE 1 - BETWEEN FAMILIES: THE UNATTACHED YOUNG ADULT

Attitudinal Task: ACCEPT THE PARENT-OFFSPRING SEPARATION

STAGE 2 - NEWLY MARRIED COUPLE

Attitudinal Task: MAKE COMMITMENT TO NEW FAMILY SYSTEM

STAGE 3 - THE FAMILY WITH YOUNG CHILDREN

Attitudinal Task: ACCEPT NEW MEMBERS INTO THE FAMILY SYSTEM; ADJUST TO CHANGES

STAGE 4 - FAMILY WITH ADOLESCENTS

Attitudinal Task: INCREASE FLEXIBILITY OF FAMILY BOUNDARIES

STAGE 5 - LAUNCHING CHILDREN AND MOVING ON

Attitudinal Task: ACCEPT A NUMBER OF EXITS FROM AND ENTRANCES INTO THE FAMILY SYSTEM

STAGE 6 - FAMILY IN LATER LIFE

Attitudinal Task: ACCEPT A SHIFT IN GENERATIONAL ROLES

From: Carter and McGoldrick (1980)

INSTRUCTIONS: Listed below are resources that you may **USE** when raising a young child. Please circle the response that best describes how often you **used** each source in the last six months. **PLEASE COMPLETE BOTH PAGES.**

FAMILY SUPPORT SCALE (page 1)

USE

RESOURCES	not available	never use	rarely use	sometimes use	generally use	almost always use
1. My spouse or partner	0	1	2	3	4	5
2. My parents	0	1	2	3	4	5
3. My spouse's parents	0	1	2	3	4	5
4. My relatives/kin	0	1	2	3	4	5
5. My spouse's relatives/kin	0	1	2	3	4	5
6. My own children	0	1	2	3	4	5
7. My friends	0	1	2	3	4	5
8. My spouse/partner's friends	0	1	2	3	4	5
9. Other parents/parent groups	0	1	2	3	4	5
10. Co-workers	0	1	2	3	4	5
11. Early Intervention program	0	1	2	3	4	5
12. School/day care center	0	1	2	3	4	5
13. Church or synagogue	0	1	2	3	4	5
14. My family/child's doctor	0	1	2	3	4	5
15. Social workers, therapists, teachers	0	1	2	3	4	5
16. Public health agencies, mental health agencies	0	1	2	3	4	5
17. Other (please specify)	0	1	2	3	4	5

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INSTRUCTIONS: Listed below are resources that you may find **HELPFUL** when raising a young child. Please circle the response that best describes how **helpful** the source was in the last six months.

(page 2)

HELPFULNESS

RESOURCES	not available	never use	not at all helpful	sometimes helpful	usually helpful	very helpful	almost always use
1. My spouse or partner	0	1	1	2	3	4	5
2. My parents	0	1	1	2	3	4	5
3. My spouse's parents	0	1	1	2	3	4	5
4. My relatives/kin	0	1	1	2	3	4	5
5. My spouse's relatives/kin	0	1	1	2	3	4	5
6. My own children	0	1	1	2	3	4	5
7. My friends	0	1	1	2	3	4	5
8. My spouse/partner's friends	0	1	1	2	3	4	5
9. Other parents/parent groups	0	1	1	2	3	4	5
10. Co-workers	0	1	1	2	3	4	5
11. Early Intervention program	0	1	1	2	3	4	5
12. School/day care center	0	1	1	2	3	4	5
13. Church or synagogue	0	1	1	2	3	4	5
14. My family/child's doctor	0	1	1	2	3	4	5
15. Social workers, therapists, teachers	0	1	1	2	3	4	5
16. Public health agencies, mental health agencies	0	1	1	2	3	4	5
17. Other (please specify)	0	1	1	2	3	4	5

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ALTA MIRA SURVEY OF FAMILY NEEDS

Listed below are some of the needs and concerns expressed by parents of children with special needs. We are interested in those areas with which you would like help. Please read each statement. If you and your family are doing fine with an area at this time, circle #1. If you are not sure, circle #2 and be sure to discuss it with the staff. If you would like help at this time circle #3. Circle #4 if an area is a major concern. Circle N/A if a question does not apply to you and your family.

	Doing Fine	Not Sure	Would Like Help	Major Concern	Does Not Apply
Need For Information:					
1) I need more information about my child's condition or disability.	1	2	3	4	N/A
2) I need more information about how to handle my child's behavior.	1	2	3	4	N/A
3) I need more information on how to play with or talk to my child.	1	2	3	4	N/A
4) I need more information about how to teach my child.	1	2	3	4	N/A
5) I need more information about how children grow and develop and what to expect next.	1	2	3	4	N/A
6) I need more information on other services, agencies, etc. available for my child.	1	2	3	4	N/A
Concerns:					
7) I am concerned about my relationship with my child.	1	2	3	4	N/A

	Doing Fine	Not Sure	Would Like Help	Major Concern	Does Not Apply
8) I am concerned about my feelings toward my child.	1	2	3	4	N/A
9) I am concerned about the way I handle my child's behavior.	1	2	3	4	N/A
10) I am concerned about my child's:					
sleeping	1	2	3	4	N/A
feeding	1	2	3	4	N/A
crying	1	2	3	4	N/A
movement	1	2	3	4	N/A
sitting	1	2	3	4	N/A
crawling	1	2	3	4	N/A
babbling	1	2	3	4	N/A
playing with toys	1	2	3	4	N/A
being happy	1	2	3	4	N/A
talking	1	2	3	4	N/A
playing with other children	1	2	3	4	N/A
eating by himself/herself	1	2	3	4	N/A
rate of development	1	2	3	4	N/A
hearing	1	2	3	4	N/A
vision	1	2	3	4	N/A
toileting	1	2	3	4	N/A
inappropriate behavior	1	2	3	4	N/A
Needs for Support:					
11) I would like to have someone in my family that I can talk to more.	1	2	3	4	N/A
12) I feel isolated from some of my friends.	1	2	3	4	N/A

	Doing Fine	Not Sure	Would Like Help	Major Concern	Does Not Apply
13) I would like to talk to other parents of children with special needs.	1	2	3	4	N/A
14) I would like to meet with a counselor to talk about how I'm doing.	1	2	3	4	N/A
15) I need reading material about other parents who have a child similar to mine.	1	2	3	4	N/A
16) I need to have more time to myself.	1	2	3	4	N/A
17) I feel our situation is very serious at this time, and I would like to talk to a psychologist or psychiatrist.	1	2	3	4	N/A
18) I would like help understanding and/or working with my child's doctors, teachers, or therapists.	1	2	3	4	N/A
19) As a single parent I feel I have special needs.	1	2	3	4	N/A
Explaining to Others:					
20) I need more help in how to explain my child's condition to siblings and other children.	1	2	3	4	N/A
21) I need more help in explaining my child's condition to either my parents or my spouse's parents.	1	2	3	4	N/A
22) My spouse and I need help in understanding and accepting our child's condition.	1	2	3	4	N/A

	Doing Fine	Not Sure	Would Like Help	Major Concern	Does Not Apply
23) I need help in knowing how to respond when friends, neighbors, or strangers question my child's condition.	1	2	3	4	N/A
24) I need help locating a doctor or dentist who will understand our family needs.	1	2	3	4	N/A
25) I need help locating babysitters or respite care providers for my child.	1	2	3	4	N/A
26) I need help locating a day care center or preschool.	1	2	3	4	N/A
Financial Needs:					
27) I need help locating therapy (OT,PT,SLP) for my child.	1	2	3	4	N/A
28) I need help locating parent support groups.	1	2	3	4	N/A
29) I need more help in paying for expenses such as food, housing medical care, toys, clothing, babysitting, transportation, respite, day care. (Please circle concerns.)	1	2	3	4	N/A
30) I need more help getting special equipment for my child's needs.	1	2	3	4	N/A
Family Functioning:					
31) Our family needs help in discussing if we are on the right track.	1	2	3	4	N/A

	Doing Fine	Not Sure	Would Like Help	Major Concern	Does Not Apply
32) Our family needs help in discussing problems and reaching solutions.	1	2	3	4	N/A
33) Our family needs help in deciding who will do household chores, child care and other family tasks.	1	2	3	4	N/A
34) Our family needs help organizing our time.	1	2	3	4	N/A

Other: Add any other needs not covered in this survey. You may also list family strengths in this space.

Optional:
Child's name:________________
Who filled out this survey:________________
Date:________________

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by Alta Mira
Specialized Family
Services, 1988

ENABLING AND EMPOWERING FAMILIES

Principles and Guidelines for Practice

Carl J. Dunst
Carol M. Trivette
Angela G. Deal

Brookline Books, 1988
Resources, Social Support, and Family Functioning
Qualities of Strong Families

The pioneering work of Otto (1962, 1963) forms the basis of current family strengths research. The most ambitious work to date on family strengths has been conducted by Stinnett and his colleagues (Stevenson, Lee, Stinnett, & DeFrain, 1983; Stinnett, 1979, 1980, 1985; Stinnett & DeFrain, 1985a; Stinnett, Knorr, Defrain, & Rowe, 1981; Stinnett, Lynn Kimmons, Fuenning, & DeFrain, 1984) who have obtained extensive information from families about the characteristics that define strong families. Curran's (1983) work, on the other hand, has attempted to identify the traits of healthy (strong) families from the perspective of professionals with extensive but varied experiences working with families. There is remarkable congruence between the findings of Stinnett et al. and Curran on the characteristics that contribute to a positive family functioning style.

The work of Stinnett et al. and Curran as well as others (Hill, 1971; Lewis, Beavers, Gossett, & Phillips, 1976, Otto, 1975; Satir, 1972) suggests that there are about 12 major, nonmutually exclusive qualities of strong families. Before listing these characteristics however, it should be made explicitly clear that not all strong families are characterized by the presence of all 12 qualities. *A combination of qualities appears to define strong families, with certain combinations defining unique family functioning styles.* As Lewis et al (1976) demonstrated, "optimally functioning or competent families appears to be [due to] the presence and interrelationship of a number of variables" (p.205). With this caveat, the 12 qualities include:

1. a belief and sense of *commitment* toward promoting the well-being and growth of individual family members as well as that of the family unit
2. *appreciation* for the small and large things that individual family members do well and encouragement to do better.
3. concentrated effort to spend *time* and do things together, no matter how formal or informal the activity or event
4. a sense of *purpose* that permeates the reasons and basis for "going on" in both bad and good times
5. a sense of *congruence* among family members regarding the value and importance of assigning time and energy to meet needs
6. the ability to *communicate* with one another in a way that emphasizes positive interactions
7. a clear set of family *rules, values,* and *beliefs* that establishes expectations about acceptable and desired behavior
8. a varied repertoire of *coping strategies* that promote positive functioning in dealing with both normative and nonnormative life events
9. the ability to engage in *problem-solving* activities designed to evaluate options for meeting needs and procuring resources
10. the ability to be *positive* and see the positive in almost all aspects of their lives, including the ability to see crisis and problems as an opportunity to learn and grow
11. *flexibility* and *adaptability* in the roles necessary to procure resources to meet needs
12. a *balance* between the use of internal and external family resources for coping and adapting to life events and planning for the future

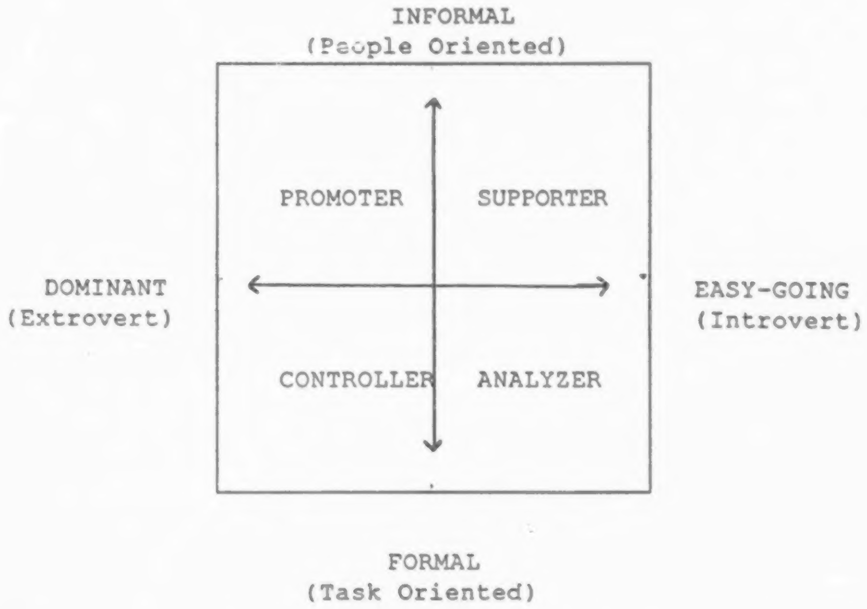
Two major themes emerge from examination of the literature upon which these 12 qualities are based. The first is that family strengths and capabilities represent intrafamily resources that are often mobilized as one way to meet needs. The second is that family strengths and capabilities are the competencies that families employ to mobilize or create extrafamily resources. The presence of different qualities, as well as their unique combinations, defines what we have come to call *family functioning style.*

The following material is adapted and reprinted with permission from Northwest Regional Education Laboratory, (for complete instrument, LEADERSHIP STYLES: A BEHAVIORALMATRIX, 1978, see ERIC Document ReproductionService No. ED 208 502.

THE BEHAVIORAL MATRIX: A BRIEF DESCRIPTION

Psychologists describe behavior as a function of perception. The feelings, beliefs, conditons, attitudes, and understandings of a person constitute the directing forces of his or her (teaching) behavior.

Because people have complex and overlapping values and beliefs, it is impossible to describe a person as having a specific, inalterable (teaching) style. However, some opposite behavior patterns can be recognized that operate on a vertical continuum of informal and formal and on a horizontal dimension of dominant and easy-going. The intersection of these opposites forms four quandrants which can be said to represent four broad categories of (teaching) style: the promoter, supporter, controller, and analyzer.



What follows is a brief description of each of the four styles. In sessions following this one closer attention will be paid to how these styles affect teaching and learning behavior.

The Promotional Style

Promoters get involved with people in active, rapidly changing situations. These people are seen as socially outgoing and friendly, imaginative and vigorous. Because people react to behaviors as a result of their own value biases, some see the promotional style as dynamic and energetic while others perceive the same behavior as egotistical.

In a work situation, promoters can get things going but may sometimes settle for less than the best in order to get on to something else. When faced with a task, these people can generate creative ideas for work, but are less likely to follow thorugh to get the task done. If a group or organization can accommodate this style, it will benefit from enthusiasm, but must tolerate a lack of concern for details. Promoters are frequently highly competitive and may need to learn to work with others in a collaborative manner.

The promoter teacher often changes classroom activities from day to day in imaginative ways. There is quite a bit of pupil mobility in their classrooms; students may move from individual work to small group work to the large group. This teacher is vulernable to inconsistent follow-through so may "lower the boom" when students get lax and suddenly give a tough assignment.

The Supporting Style

Supporters value interpersonal relations. These people try to minimize conflict and promote the happiness of everybody. Some people see the supporting style as accommodating and friendly, while others describe it as wishy-washy and "nice."

In a work situation, supporters may find it difficult to say "no," thus they frequently find themselves overcommitted. They can be counted on to do what will please others. Supporters are people-oriented and non-aggressive. They will rely on others to give directions about how to get the tasks done.

The supporter teacher pays much attention to the students' needs and growth potential. This teacher tailors lessons to the need of the student, so does a great deal of individualization. This attention to the individual may make this teacher vulnerable at the point of having to get grades in the grade book. They generally are not very good at reporting.

The Controlling Style

Controllers want results! They love to run things and have the job done in their own way. "I'll do it myself" is a frequent motto of the controller. These people can manage their time to the minute. Some see them as businesslike and efficient, while others refer to them as threatening and unfeeling.

In a work situation, controllers will make sure the job is done. They will get impatient with long discussions about "the best way" or "the way to please everybody." Controllers are confident in their ability, take risks, and push forward.

The controller teacher is very well organized. Tasks are very clear. Everyone can tell clearly when it's reading time, or spelling time, or science time. Very often achievement is the most important thing for this teacher. This teacher may be vulnerable at the point of being inflexible in classroom delivery to meet the need of the slow or weak learner or the particularly fast or strong learner.

The Analyzing Style

Analyzers are problem solvers. They like to get all the data before making a decision. Some say they are thorough, but others complain that they're slow. These people are frequently quiet and prefer to work alone.

In a work situation, analyzers bring valuable conceptual skills. They ask the difficult, important questions. Interpersonally, they may seem aloof and cool. Analyzers may miss the deadline, but they'll have all the reasons to support the delay.

The analyzer teacher loves knowledge for its own sake. They often have messy classrooms because they have all kinds of things around that might be useful sometime because you can never tell when a piece of information, or a book, or an object might come in handy. This teacher may be vulnerable at the point of being quite willing to chase after any insight or idea. After all, any fact is as good as any other fact.

Divergent and Convergent Processes

Divergent processes are those which take all the pieces of a set of information and spread them out — "explode" them — to create a whole form. Promoters and supporters like divergent processes. They like to arrange and rearrange all the parts of something to create a form. They enjoy exploring all the possibilities of an idea.

Convergent processes are processes which take all the pieces of a set of information and bring them together -- "organize" them — to achieve focus. Controller and analyzer styles enjoy these processes. They like order, neatness, clarity. They like lots of ideas but work with them most comfortably when they have focus.

A Combination of Styles

Most people have a variety of response patterns, so depending on the situation they may behave differently. Successful people come from all quadrants of the matrix. Success is not dependent on the style, but on how well you capitalize on the behaviors that come most naturally and how much you take risks and experiment with behaviors from the other styles. For example, you may think of yourself as basically being a talkative, dominant group member. You've gotten feedback from others that you have a tendency to "beat a dead horse" in order to make your point. Awareness of the Behavioral Matrix is intended to expand your response-ability. By increasing your awareness of the options that exist, you can improve your teaching behaviors and make better use of the learning styles of your students.

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DIAGNOSING YOUR TEACHING STYLE

BEHAVIORAL CHARACTERISTICS

RATING FORM

Directions: Circle one of the numbers to indicate how you see yourself in your educational role. For Example:

Dominant 1 2 3 4 Easy-going

The rater here decided that he was more easy-going than dominant, but not easy-going enough to rate a 4.

1. Appears confident	1	2	3	4	Reserved
2. Passive	1	2	3	4	Aggressive
3. Responsive	1	2	3	4	Self-controlled
4. Easy-going	1	2	3	4	Dominant
5. Takes charge	1	2	3	4	Goes along
6. Formal	1	2	3	4	Informal
7. Disciplined	1	2	3	4	Spontaneous
8. Communicates readily	1	2	3	4	Hesitant communicator
9. Accepting	1	2	3	4	Challenging
10. Appears unorganized	1	2	3	4	Appears organized
11. Initiates social contact	1	2	3	4	Lets others inititate
12. Asks questions	1	2	3	4	Makes statements
13. Overbearing	1	2	3	4	Shy
14. Reserved	1	2	3	4	Fun loving
15. Appears active	1	2	3	4	Appears thoughtful
16. Relaxed	1	2	3	4	Assertive
17. Withholds feeling	1	2	3	4	Expresses feeling
18. Relationship oriented	1	2	3	4	Task oriented
19. Pushy	1	2	3	4	Gentle
20. Discriminating	1	2	3	4	Impulsive
21. Extrovert	1	2	3	4	Introvert
22. Warm	1	2	3	4	Cool
23. Subtle	1	2	3	4	Direct
24. Distant	1	2	3	4	Close
25. States information	1	2	3	4	Saves information
26. Quiet	1	2	3	4	Talkative

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BEHAVIORAL CHARACTERISTICS

SCORE SHEET

To locate yourself on the Dominant/Easy-Going Scale: place the ratings from the Behavioral Characterists Rating Form on the lines following the corresponding question numbers below:

1. ____
5. ____
8. ____
11. ____
13. ____
15. ____
19. ____
21. ____
25. ____

Sum #1 ____

2. ____
4. ____
9. ____
12. ____
16. ____
23. ____
26. ____

Sum #2 ____

(Sum #1) + 35 - (Sum #2) = ____ divided by 16 = ____

Place an X on the following scale corresponding to the score above:

DOMINANT — EASY-GOING

1 2 3 4

Move the X down this scale

1.0 1.75 2.5 3.25 4.0

To locate yourself on the Formal/Informal Scale: place the ratings from the Behavioral Characterists Rating Form on the lines following the corresponding question numbers below:

6. ____
7. ____
14. ____
17. ____
20. ____
24. ____

Sum #1 ____

3. ____
10. ____
18. ____
22. ____

Sum #2 ____

(Sum #1) + 20 - (Sum #2) = ____ divided by 10 = ____

Place an X on the following scale corresponding to the score above.

FORMAL — INFORMAL

1 2 3 4

Move the X down this scale

1.0 1.75 2.5 3.25 4.0

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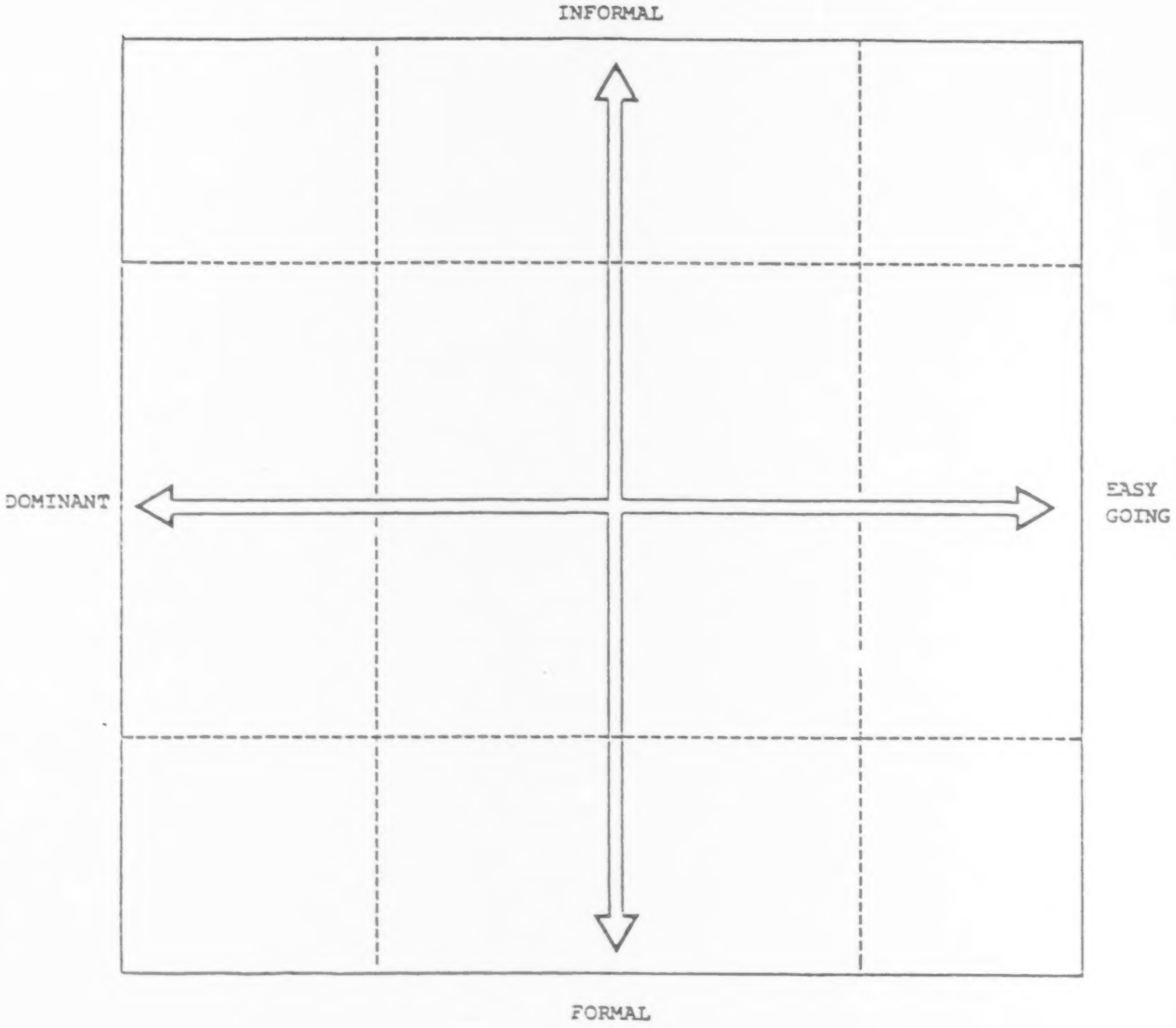
BEHAVIORAL MATRIX


INFORMAL
DOMINANT
EASY GOING
FORMAL

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CHARACTERISTICS OF EACH BEHAVIORAL STYLE AT BEST

- Asks WHO? (personal question) - Decisions easily made and easily changed - Warm, friendly - Flexible - Persuasive - Imaginative and creative - Insightful - Out front, forceful - Communicates well - Enthusiastic	- Asks WHY? (personal, non-goal question) - Decisions are agreeable to others - Good listener - Friendly - Non-competitive - Values, close, lasting friendships - Allows others to initiate - Puts others at ease - Willing to take direction - Likes a human angle
- Asks WHAT? (results-oriented question) - Decisions made easily and rapidly - Strong-willed - Performs to capacity - Quickly responds - Competitive - Persistently thorough - Eagerly ambitious - Uses time well - Likes workable and logical solutions	- Asks HOW? (technical, analytical questions) - Hesitant decision maker - Thrives on data: facts and concepts - Systematic and orderly - Quiet, non-threatening - Allows others to initiate - Problem-solver - Goal oriented, but slowly and carefully - Persistent - Serious

PRODUCTIVE AND EXCESSIVE CHARACTERISTICS OF EACH BEHAVIORAL STYLE

INFORMAL

-	+	-	+
- inconsistant	+ flexible	- impractical	+ idealistic
- childlike	+ youthful	- gullible	+ trusting
- agitated	+ enthusiastic	- patternal	+ helpful
- afraid of confrontation	+ tactful	- passive	- receptive
	+ adaptable	- overcommitted	- responsive
- lacking in conviction	+ socially skillful	- self-deprecating	+ modest
- manipulative		- obligated	+ loyal
		- perfectionist-	+ aspiring

MINANT

EAS
GOI

- domineering	+ controlling	- dull	+ practical
- impulsive	+ quick to act	- stingy	- economical
- arrogant	- self-confident	- unfriendly	+ reserved
- coercive	+ forceful	- compulsive	- thorough
- high pressure	- persistent	- plodding	+ methodical
- impatient	- urgent	- critical	- analytical
- unstable	+ eager to change	- stubborn	+ steadfast

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EACH BEHAVIORAL STYLE WILL EXCEL IN A SITUATION WHERE

- People are involved, i.e., committee work - New possibilities need to be brainstormed - There is a defined structure with boundaries - Follow thru is forced by someone else - Inspirations are allowed and encouraged - There is a lot of attention (they'll take anything, including negative put-downs) - They can talk about what is learned; i.e., tons of discussion - There is action-oriented activity: i.e., role playing, drama, learn "X" tables by jumping rope at the same time - Environment is optimistic, changing - Surrounded by friendliness and warmth	- They can please others - Harmony, respect and good feelings exist - Research and learning is on people facts - Structure, supervision and guidance is available - There is much reassurance, support and personal attention - Ideas can be developed that will benefit others - Relationship skills can be applied to get the job done: i.e., committee work - They can give and give and give - It is idealistic - Their loyalty is valued
- Organized information abounds and is valued - They are allowed to take responsibility and leadership - It is fast moving and challenging - There is a chance to assume a leadership role - Competition abounds - There is freedom to accomplish tasks their own way - There is an established authority to respect - Academic achievement is highly valued	- They can work by themselves - It is unemotional, factual, practical - There is freedom to ponder - The leader gives a systematic, structured framework - Routine is the watchword - There is a lack of pressure, low-key - Much attention given for task results - Value is placed on accumulation of facts - They can save face even when they may be wrong - There are rules for dealing with others

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EACH BEHAVIOR STYLE WILL FEEL STIFLED AND HAVE DIFFICULTY IN A SITUATION WHERE

- Physical activity is restrained - Tasks are analytical, systematic and/or disciplined - There are many detailed, logical presentations; they want the bottom line and could care less how you got there - There is only routine with no room for adventure and action-oriented activities - Allowed to go any which way on a project without understood boundaries and direction	- Left to own direction - Task achievement is the dominant goal - Socializing is not allowed - Conflict is normal
- The situation is not under their control - Their goals are thwarted - It is not fast moving - Leaders "wing it" - There are many distractions - No one appears to be "in charge"	- Little organization exists - Nobody reaches out to them - Inconsistency is routine - Pressure abounds - Loud, multi-stimulating activity exists - The leader is dominating, controlling - Decisions are not based on facts

CONFLICTS TYPICAL OF EACH BEHAVIORAL STYLE

- Others may feel steamrolled - Rapid change causes others to see action as shotgunning and unstable - Excitement seen as egotism - Forceful, aggressive, up front nature may cause others to see trait as manipulative - Impatience can result in arguments	- Unmoved by logic, creating impatience with analyzers and controllers - Resents tactlessness of others out of their sensitivity; assumes others are there too - Values harmony over anything else and prefers to agree - Subordinates own interests to those of others - Withholds unpleasant information
- May run over others trying to get tasks accomplished - Through organizing the situation, will include any idle bystander - Will get backed-up when others tell them what and how to get the task done - Anger and impatience moves quickly when distracted by the promoter's spontaneity - Through the critical and judgmental eye, will create distance with others	- Serious, orderly manner draws impatience from others - Critical and judgmental eye toward others creates distancing - Indecisions create confusion and impatience - When cornered, pressure builds quickly - Allowing others to initiate may build resentment over time - States position bluntly, without concern and feeling for others - Feels rejected unless a group is willing to draw data and warmth out

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STYLISTIC DIFFERENCES

Person with	Promoting Style	Controlling Style	Supporting Style	Analysing Style
Needs to learn	• Patience • Discipline	• Humility	• Determination	• Spontaneity
Measures progress by	• Applause	• Results	• Attention	• Activity
Will ask	• Who?	• What?	• Why?	• How?
Saves	• Effort	• Time	• Friendships	• Face
Takes encorsements from	• Social skills—likes to be good at winning people	• Getting the job done well and on time	• Friends--"If they still like me, I must be doing it right."	• Knowledge
Needs to be given	• Some structure within which to reach the goal	• A position that requires relying on cooperation with others	• Structure for the goal and methods for the task	• Some methods of dealing with other people
Relies on the power of	• Feeling—expects that "winning ways" will carry him or her through	• Personality--hopes to be strong enough to "wing it"	• Acceptance--uses compliments to get approval	• Expertise--gathers more data when in doubt
Motivated by	• Friendly people • New opportunities • Attention	• Responsiblity • Authority • Achievement	• Trust and security • Need for services • Appeal to loyalty	• Logic • Routine • Structure
Most effective environment is	• Social • Changing • Youthful • Optimistic	• Competitive • Open • Challenging • Opportunistic	• Respecting • Supporting • Reassuring • Idealistic	• Unemotional • Factual • Scientific • Practical

TO MAKE THE BEST USE OF YOUR STRENGTHS

1. Capitalize

   Find as many opportunities as possible to use your strongest style. Do what you do best. "If ya got it, flaunt it."

2. Augment

   Work with the people who have the strengths that you don't. Provide checks and balances for each other. Learn about what others do by watching, appreciating. "You do your thing, and I'll do my thing."

3. Extend

   Take the risk. Try some new behaviors. Find safe environments to practice behaviors from one of the other quadrants. "The only way to do it, is to do it."

4. Control Excesses

   When the chips are down and the pressure is on, resist the temptation to go back into the old tried and true method of responding. Practice moderation. "Balance is the key to power."

Northwest Regional Educational Laboratory
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SECTION IV:

UNDERSTANDING FAMILY VARIABLES

* Self-Awareness: Roots of Beliefs and Values
* Family Style
Life Events
Family Support Networks
Family Strengths
* Self-Awareness: Teaching Styles

Overheads:

Family Life Cycle Stages

FAMILY LIFE CYCLE STAGES

STAGE 1 - BETWEEN FAMILIES: THE UNATTACHED YOUNG ADULT

Attitudinal Task: ACCEPT THE PARENT-OFFSPRING SEPARATION

STAGE 2 - NEWLY MARRIED COUPLE

Attitudinal Task: MAKE COMMITMENT TO NEW FAMILY SYSTEM

STAGE 3 - THE FAMILY WITH YOUNG CHILDREN

Attitudinal Task: ACCEPT NEW MEMBERS INTO THE FAMILY SYSTEM; ADJUST TO CHANGES

STAGE 4 - FAMILY WITH ADOLESCENTS

Attitudinal Task: INCREASE FLEXIBILITY OF FAMILY BOUNDARIES

STAGE 5 - LAUNCHING CHILDREN AND MOVING ON

Attitudinal Task: ACCEPT A NUMBER OF EXITS FROM AND ENTRANCES INTO THE FAMILY SYSTEM

STAGE 6 - FAMILY IN LATER LIFE

Attitudinal Task: ACCEPT A SHIFT IN GENERATIONAL ROLES

From: Carter and McGoldrick (1980)

SECTION IV:

UNDERSTANDING FAMILY VARIABLES

* Self-Awareness: Roots of Beliefs and Values
* Family Style
Life Events
Family Support Networks
Family Strengths
* Self-Awareness: Teaching Styles

Supplemental Materials:

Optional Activity: Self-Awareness and Adult Learning Styles
Teaching Style Inventory

OPTIONAL ACTIVITY: SELF-AWARENESS AND ADULT LEARNING STYLES

OBJECTIVE 1

To learn about one's own learning style (thus increasing self awareness) and how this relates to working successfully with parents.

As an introduction the FACILITATOR gives a mini-lecture on the rationale (see previous page for rationale) for understanding adult learning styles. Include the following points.

POINTS:

- Learning style appears to be different than a superficial trait (it probably won't change). Everybody has one. It is a positive attribute; it is a preference. No one style is better than another or of more value than any other (its value is neutral).
- A relationship exists between learning style and interpersonal communication. For example, a breakdown in communication may be the result of different learning styles.

Ask participants to complete the Learning Style Inventory developed by David Kolb and adapted by McBer (1976). {**NOTE:** This should be completed by the participants prior to training.} Discuss the following (or similar) questions.

1. What can you share about your own learning style?
2. What was your most rewarding learning experience? Why? What does it tell you about your own learning style?

NOTE: In several months, follow-up with "Teaching Styles" from this section.

LEARNING STYLE ASSETS AND LIABILITIES ITEM 13

Your preferred learning style both helps and hinders you in making changes in your life and dealing with others. Each style has its specific strengths and weaknesses. Here are some of the assets and liabilities you might encounter.

LEARNING STYLE ASSETS

Enthusiastic learners tend to:	*get others involved; operate on intuition, "gut" reaction; take risks with new experiences; be very active when motivated; talk to other people and get inspiration in the process; try several options
Imaginative learners tend to:	*generate lots of options for change; observe how others have made the change; use creative hunches; play with ideas; fantasize; see images; let ideas integrate or come together before changing; wait for the best timing.
Logical learners tend to:	Gather relevant facts in logical order; be very organized, feel secure in change; read books, look at several approaches, double check; use resources well (libraries, information-search programs); analyze options, calculate probabilities; map out on paper before jumping in; work well alone.
Practical learners tend to:	*see change as problem to be solved; use detective skills to get facts; evaluate options, set up trial situation; set goals and acts, not get bogged down; work well independently.

LEARNING STYLE LIABILITIES

Enthusiastic learners tend to:	*lack organization; not set goals; be impulsive; become so involved, they get splintered; fail to take care of loose ends; become unbelievable to other people; change jobs too quickly.
Imaginative learners tend to:	*be afraid to change relationships; create conflict or hurt people; lack the ability to change results; just offer good ideas; be comfortable with the status quo; resist being pushed; wait too long for inspiration.
Logical learners tend to:	*need to much evidence before acting; be too cautious, slow methodical; not get involved with people; become too bogged down in theory; want too many guarantees; take risks very slowly.
Practical learners tend to:	*not use enough caution in action; let the task override people; have trouble waiting for anything; be impatient; need to control things and do them alone; not listen enough to others

SECTION V:

BUILDING A FAMILY-CENTERED AGENCY

- The IFSP Process
- Developing a Family-Centered Philosophy

UNDERSTANDING FAMILY VARIABLES

WHAT YOU NEED:

Handouts:

Summary of Information
Categories
Major Questions
Ecological Mapping (Dunst, c>, 1985)
Agency A
Mission of A Family-Centered Agency
Q-Sort playing cards and form board (Kroth, R.L. & Krehbiel, R., 1982 and Project AIM, 1982)

OverHeads:

Key
Child's Present Levels
It is Our Belief
Certainly Interventionists
Major Outcomes
Name of Case Manager
To the extent...
A Philosophy Provides
Touring Bike
Ecological Mapping

Equipment:

Overhead Projector
Flip Chart and Easel

Background Materials:

Federal Register, Vol. 54, pp. 26211-26314, 26320-26322, 26330-26333, 26339-26341
Chapter Six - Developing the IFSP: Outcomes, Strategies, Activities and Services, (Johnson, B.H., McGonigel, M.J., & Kaufmann, 1988)
Q-sort Instructions (Kroth, R.L. & Krehbiel, R., 1982 and Project AIM, 9182)
Rules For Controlled Brainstorming

THE INDIVIDUAL FAMILY SERVICE PLAN

GOAL: To give participants the opportunity to evaluate their own current procedures and forms from a family-centered perspective and to make any changes they think are warranted.

RATIONALE: The law reads that programs must be held accountable for reporting on child progress.

OBJECTIVE 1

To gain an awareness of the letter and intent of **FEDERAL LAW 99-457**.

The FACILITATOR presents an overview of (1) the **Public Law 99-457 and the guidelines** (Johnson, McGonial, & Kaufman, 1989) and (2) the intent of P.L. 99-457 as it recognizes the unique role families play in the development of their young child.

The FACILITATOR displays the **OVERHEAD: KEY** and discuss the key components required by P.L. 99-457.

OVERHEAD: KEY

1. Child's Present Levels
2. Family's Strengths and Needs
3. Major Outcomes
4. Specific Services
5. Projected Dates
6. Case Manager
7. Transition Plan
8. Evidence of Interdisciplinary Team

NOTE: The following objectives will cover the points of the law. The participants should be asked to discuss the implications of each point. Use the **overheads** and **handouts** during the discussion. The Federal Register, Vol. 54, no. 119 (I989) is included in the background materials.

OBJECTIVE 2

To discuss the meaning of the **CHILD'S PRESENT LEVELS** according to Federal Register 303.344(a) - (p. 26321).

The FACILITATOR displays the **OVERHEAD: CHILD'S PRESENT LEVEL** and briefly discuss its meaning:

> "A statement of the **child's present levels** of physical development, cognitive development, language and speech development, psychosocial development and self-help skills, based on acceptable objective criteria" (FR #303.69, June 22, 1989).

NOTE: This section of the law should be presented as an overview. Sites need to be aware of its existence and plan accordingly if they have not already done so. 'Objective Criteria' are determined by each state.

OBJECTIVE 3

To discuss the content of family **STRENGTHS** and **NEEDS** statements according to F.R. 303.344(b) - (p. 26321 & p. 26339).

The next section of the law concerns the gathering of statements regarding **family's strengths and needs.** The Association for The Care of Children's Health (ACCH), publication "Guidelines and Recommended Practices for the Individualized Family Service Plan" (Johnson, McGonigel, & Kaufman, 1989) reads:

> ". . . it is important to note that this component is not an assessment of the family. Rather, it is an identification of family strengths, resources, needs, and concerns that an individual family decides are relevant to its ability to enhance the development of its child" (pg. 18).

The phrase "relating to enhancing the development of the child" is important. The following quote from Bailey, Winton, and Rouse (1988) may help clarify for participants the intent of the law in regard to family outcomes:

The FACILITATOR displays the **OVERHEAD: It is our belief...**

> "...it is our belief that the best approach to take is one that will cause the least harm or conflict. The answer ultimately will depend on family preferences."

Then the FACILITATOR displays the **OVERHEAD: Certainly Interventionists** and explains that Bailey (1988) and his colleagues had this to say about program responsibilities:

> "Certainly interventionists should not be expected to intervene directly in all potential areas of **family need**; however, to be able to help families identify their own needs and facilitate their efforts to locate appropriate resources seems essential." (p. 15-16)

POINT: Little is said about the measurement of **family strengths** except that, as with need, "...the assessment of families...must be based on information provided by the families through personal interviews" (F.R., 1989) or written statement. Professionals in the field seem to feel that personal interviews work best to gather information about **family strengths** and preferred family style. (See Sections titled Interviewing and Family Functional Style.)

OBJECTIVE 4

To clarify the meaning of and observe techniques for developing **OUTCOME STATEMENTS** according to F.R. #303.69(c) - (p. 226321 & 26339)

The FACILITATOR discusses the following points:

- A statement of **major outcomes** must be included in the IFSP (FR section c #303.69).
- It suggests that progress toward the **outcomes** be documented.
- The guidelines, however, imply that this is true for children but not for adults 'progress' in any area. However, satisfaction may be assessed based on parental report. (See Section on the Partnership, Collaboration and Goal Attainment Scaling for a discussion on reporting parent satisfaction through Goal Attainment Scaling.)

The FACILITATOR displays the **OVERHEAD: Major Outcomes**. These quotes appear in the guidelines published by the Association for the Care of Children's Health (ACCH). Discuss how an **outcome** statement is written. (Refer to background material for complete ACCH chapter on **outcomes**.)

The FACILITATOR demonstrates in a role-play the interviewing techniques used to arrive at an outcome statement (see Interviewing section, Objective 3). The FACILITATOR explains that we are on "fast forward," that is several visits have already occurred, rapport has been established and family preferences have been identified and prioritized. Tell the participants that the "visit" has been scheduled to determine outcomes and this has been explained to the parent. Use a completed **SURVEY OF FAMILY STRENGTHS AND NEEDS**. (An example is in the Training Materials of Section IV of this text.) Ask the parent to complete this before the workshop). In the role-play with the parent, review the survey and the priorities. Ask the parent if there is anything that he would like to change or add. From the priority list, continue the interview until one or two outcome statements are written down. Stop the interview and begin a discussion. Both the FACILITATOR and the parent should discuss what happened. Ask for comments from the participants.

Another point often raised by early intervention programs concerns the nature of family **outcomes** and the responsibility of the staff to carry out these types of **outcomes** with the families. Bailey, et al. discussed two types of family **outcomes**. The first is PROXIMAL. An example is when the parent learns to teach the child a specific skill. The other is DISTAL. Attendance at parent support groups would be a distal outcome (1988).

The FACILITATOR gives participants the **HANDOUTS: Summary of information . . .** and **Categories and Major Questions** . . . and discusses the major points.

NOTE: Each State's guidelines will be more specific regarding the definition of **outcomes** and progress.

OBJECTIVE 5

To discuss the **SERVICES** specified by F.R. #303.344(d) -(p. 26321-26322).

The FACILITATOR explains that it is necessary to specify the **services** that will be put in place to meet the unique needs of the child AND THE FAMILY (FR section d). Bailey, et al. state that specificity will be left up to the professionals and the families, and that criteria for goal attainment will vary greatly.

OBJECTIVE 6

To discuss the **DATES** and **DURATION** specified by F.R. 303.344(f) - (p. 26322)

Initiation dates and anticipated **duration** of services is best explained in the state guidelines (see supplemental materials for an example from the State of New Mexico Guidelines).

NOTE: This requirement is interpreted differently by each state. The difficulty in obtaining **outcome** statements before a family is ready is a concern that may arise. It is important to be clear about how the state guidelines may allow for these situations.

OBJECTIVE 7

To discuss the assignment of the **CASE MANAGER** according to F.R. #303.344(g) - (p. 36322, 36330-36331, & 26311)

The last key component of the content of the IFSP concerns the assignment of a **CASE MANAGER**.

The FACILITATOR displays the **OVERHEAD: Name of Case Manager**

> The name of the **case manager** from the profession most immediately relevant to the child's or family's needs who will be responsible for the implementation of the IFSP and coordination with other agencies and persons

NOTE: Case Managers may also "be appointed in any way according to State Law and the profession includes Case Managers" (F.R., 1989 - P. 36331).

Some professionals including Dunst & Trivette (1986), are very concerned about this particular mandate in the law as can be seen in the next part of the overhead:

The FACILITATOR displays the **OVERHEAD: To the Extent. . .** and discusses the relationship of decision making and helplessness.

Parents may take on the title of **case manager** should they prefer to do so; however, a professional in the agency must also be identified as the **case manager**. The parent and professional can share this responsibility and both names can be written into the IFSP. Persons who serve as **case managers** must receive appropriate training. This does not necessarily include the parent.

NOTE: New Mexico Parents Reaching Out (a statewide parent support group) has had an excellent training program in place for several years designed to teach parents to be **case managers** (see references for address).

NOTE: A transition plan should be reflected in the IFSP (F.R. 303.344(h) - p. 26322). Each hospital, agency or school should arrange for transition according to the resources of the community.
Services must be delivered by an multidisciplinary team (F.R. 303.17 - p. 26313). Procedures should be drawn up to assure that any parent who so desires can participate on the team of professionals assigned to their family. This might include attendance at team meetings where the child is being discussed.

These two aspects of the IFSP will not be covered in this manual. They are two of the most important components of the IFSP process requiring a great amount of content and should be addressed in detail. For more information on transition plans and multidisciplinary teams see the ACCH guidelines (Johnson, et.al, 1989), state guidelines, and the federal register.

BUILDING A FAMILY-CENTERED PHILOSOPHY

GOAL: To determine and develop a family-centered philosophy.

RATIONALE: "A philosophy provides a foundation for interpersonal relationships and actions for a program. It affects hiring practices, everyday communication and intervention, evaluation, monitoring, scheduling and routines, plans for children and families. Without a philosophy, a program lacks coherence, adaptability and cohesion". (National Institute of Mental Health, 1987, p.9).

NOTE: We recommend that this section should be accomplished after the other sections have been completed.

OBJECTIVE 1

To discuss the importance of developing a program philosophy.

The FACILITATOR displays **OVERHEAD: A Philosophy Provides..."**

Ask participants to share their ideas on what makes up a philosophy, mission/purpose, and procedures/policies.
Initiate a brief discussion on importance of developing philosophy and mission statements for the program or agency. Discuss whether or not the program feels this is necessary. Public school programs may have special problems in developing such statements. If this applies, these problems should be addressed.

OBJECTIVE 2

To discuss **ecological** and **systems theories** as they apply to a family-centered philosophy.

The FACILITATOR develops a mini-lecture and discussion on the following points:

1) Participants need to gain an awareness of **systems theory** and learn to view themselves as "part of the **family's support network**" within the **ecological system**.

To make this clearer, think about "**systems**"in general. **Systems** exist everywhere. Display and discuss the **OVERHEAD**: **Touring Bike...**During the discussion point out that the body is a **system.** If part of it is ill, other parts are affected. A bad headache affects appetite, desire for movement, desire to socialize, and study. There is a relationship between the parts so that what affects one part affects the functioning of the whole.

2) All **systems** involve reciprocity where actions "sent out" return in some manner. Think of a pebble dropped in a pond. The concentric rings or "waves" the pebble creates flow to the shore where they bounce off and return to the center. Now think of a child in school. The interactions between school and home are reciprocal.

For example, the school may institute a series of strategies to change one behavior the child exhibits. The feedback form school to home may alter the parents' view of the child and subsequently their behavior toward the child. The parent may try new strategies at home, affecting a change in intervention needs at school.

POINT: An **ecological model** views the individual as nested in multiple interrelated environmental **systems.** The individual's behaviors are understood as rooted in social, cultural and environmental settings.

With an "appreciation for the reciprocal and interactive nature of the child and his/her environment" (Fine, 1985) interventionists can identify appropriate intervention strategies.

NOTE: There is no "standard operating procedure"... **System-ecological** perspective is just that - a perspective - involving a mental frame-of-reference and a familiarity with a wide-range of techniques and interventions that can be used selectively. (Fine, 1985)

ACTIVITY: Ask participants to respond to the following question.

> What can the teacher in a rural community do when she recognizes a need for special equipment that is locally unavailable?

Create a mini-lecture and discussion around the responses. The following is an example of how the discussion might proceed.

The teacher may locate equipment by:

- calling a teacher he knows in another community
- calling schools in nearby communities
- obtaining prices from catalogues
- locating a source to rent the equipment
- obtaining bids to have equipment made

Point out that each choice may involve a different aspect of the teacher's **ecological system**. The teacher's network includes friends, co-workers, school administrative staff, other professionals, community people, or businesses in other communities. If the equipment is to be purchased, then the school's budget or fundraising activities are involved. Each choice involves different but overlapping networks; all choices revolve around the teacher. Each choice defines later possibilities. Think of the teacher as nested in several systems (each could fulfill the need for the equipment, each may be connected to the other). Select one of the ways the teacher might network to locate equipment and discuss what she would do next. For example, if another area school has the equipment what would the teacher need to do? Possibilities may include:

- arrange to share or tarde the equipment (may involve identifying a key person in each school and working out a schedule).
- arrange a way to transport the equipment (may involve investigating and making arrangements for regional delivery trucks such as newspapers, groceries, construction materials, etc. or local people who often travel the area).

At this point the plan for obtaining the equipment has become more complex, involving more people.

Ask the participants to identify parts of the **system** and to discuss how the teacher accessed her network. (Included may be the local school, the school in the other community, a staff member from the other school, the truck driver, delivery person, or local community person who travels the area).

Ask the participants what they might do if they were the teacher in this example - who would they contact first, second, etc. How would they network? Ask them to give a rationale for their answer. Demonstrate how we all have a personal style and may access our **system** differently.

Next, create a discussion about **reciprocity**. The discussion might focus on the following outcomes: the truck drivers awareness or involvement with the schools, the compensation for the other school, or the future opportunities to share other equipment, materials or staff.

Then ask participants what would happen if the contact person in the other school moved away. Ask: What would happen to the equipment exchange? Who would be affected?

The following is another example that may be used for further discussion on reciprocity.

To provide appropriate and effective training, what steps might a facilitator use to insure that reciprocity occurs between themselves and the participants?

OBJECTIVE 3

To apply knowledge of **family systems theory** within a family-centered philosophy.

As with all systems the family system is part of an ecological system. The family is a **system** in the ways that its parts interact. A **system's** view considers the roles, relationships, implicit rules and the balance of forces within the family structure. Understanding the family members, including the child requires an understanding of their sets of relationships and the characteristics of the **system** within which they function.

Display and discuss the **OVERHEAD** and give the **HANDOUT: Ecological Mapping** (dunst, 1985). Make the following points;

1) The map shows the multidimensional nature of factors that influence child and family behavior.

2) There are seven topographical groups. They are nested and each is imbedded in the next highest level. They are 1. child, 2. family, 3. formal kinship network, 4. informal kinship network, 5. social organizations, 6. human service agencies and professionals, and 7. policy makers (ecosystem).

3) The bottom portion suggests some of the characteristics, forms of support and ecosystem influences that may indirectly or directly affect family development and functioning.

4) Specific sources of support comprise each group, however, these sources of support may or may not be supportive. The regions marked A and B shows the relationship between the need for help and the availability and supportiveness of each group.

For example, in Region A, a person's need for help from the formal social support system (human services, health agency, daycare, etc.) is small since the informal system (the family, friends) is large or adequate and, conversely, in Region B the informal support system is small or not adequate so the need for support from the social support system is greater.

The relationship among the parts represents the families' network. Discuss when and how often families access their networks. Make the following points:

1) The following list is an example reflecting the order of how many families seek support:

1. close interfamily
2. friends or neighbors
3. co-workers
4. clergy
5. those in their formal network such as social workers, early childhood interventionists

During the discussion refer to Regions A and B on the **Ecomap** and discuss at what point families may choose to seek help from the formal social support system or the early intervention program.

2) Point out that families may access the early intervention program but may not perceive a need for help from the program. For example, a family with a down's syndrome child may not perceive a difference in their child's behavior and what they expect of the child, therefore, they may not see a need for intervention. Their failure to see a necessity for intervention may have less to do with any lack of concern and more to do with the family's ability to provide an adequate environment for their child.

3) The family's **system** (as any system) will always seek stability and may resist change. parents may choose not to carry out a school program because they perceive that stability is more important.

NOTE: The article by Turnbull, Brotherson, and Summers (1984) listed in the bibliography is an excellent source of information on **family-systems**.

ACTIVITY:

Discuss the following example (or any others that may come to mind) and evaluate them to identify the **systems** involved and to determine interrelatedness of **systems**:

What happens when you need childcare?

For example: One person may say they have relatives in town that are willing to help but they believe their child would benefit from being with other children. They would like to find a center for their child.

Ask participants to think of themselves as at the center of the **ecological map**. Then ask them to discuss what **systems** might be involved in finding a preschool or day care center. The following **systems** might be discussed:

informal system - a school in the neighborhood,

formal social support system - citywide or YWCA child-care centers,

formal social support system - public information about centers such as a referral service or brochures;

informal system - friends or family members who have children may give referrals;

ecosystem - guidelines on quality childcare published in newspapers or magazines.

Next, discuss how these **systems** may be related. For example, the center (representing formal support) may be close to work or home (formal and informal support), the parent may develop mew friendships (informal support) in the neighborhood (informal support) or at work (informal and formal support). Ultimately the parent may become involved in school activities (formal support), policy making locally or statewide (formal support and ecosystem).

Potentially the parent becomes a resource for other parents (formally or informally or indirectly through the ecosystem) who are looking for child care. This also demonstrates the reciprocal nature of the **ecological system.**

NOTE: The FACILITATOR is referred to the article by Bailey, D.B., Farel, A.M., O'Donnell, K.J., Simeonson, R.J., & Miller, A.C. (1986) listed in the bibliography, for an alternative approach to preparing infant interventionists "that recognizes the ecological notion that the family system is nested within larger system" (p. 67).

OBJECTIVE 4

To tie **ecological** and **family systems theory** to a family-centered philosophy.

Discuss how **systems theory** becomes the framework for building a philosophy. The following quote may help with the discussion.

The change to a family-centered approach has been likened to a Copernican Revolution. Ask participants to:

> "Visualize the concept: the family is the center of the universe and the service delivery system is one of the many planets revolving around it. Now visualize the service delivery system at the center and the family in

> orbit around it. Do you see the difference? Do you recognize the revolutionary change in perspective. We would move from an emphasis on parent involvement (i.e. parents participating in the program) to family support (i.e. programs providing a range of support services to families). This is not a semantic exercise - - such a revolution leads us to a new set of assumptions and a new vista of options for service? (Turnbull and Summers, 1985, p. 12).

DISCUSSION:

The FACILITATOR gives the participants the **HANDOUT: Agency A...** Ask participants to discuss how this example relates to the quote from Turnbull and Summers stated above. Ask how would a shift in attitudes would change the ways the agencies provide services.

POINT: Family-centered services are responsive to the priorities of the child and the family. Family-centered services are flexible and accessible to the families they serve.

Give participants the **HANDOUT: Mission of a Family-Centered Approach**. Discuss the points on the **HANDOUT**.

OBJECTIVE 5

To look at attitudes regarding a change form a child-centered to a **family-centered philosophy**.

ACTIVITY with the Q-SORT

The participants should be introduced to the Q-SORT (Kroth, 1982 & project AIM, 1982) adapted by Project Ta-kós for the purpose of looking at attitudes regarding a family/child-centered approach. The FACILITATOR should give **HANDOUT: Q-SORT** and explain the instructions. This activity takes about 1 hour and should be done individually then discussed as a group.

OBJECTIVE 6

To make a commitment to develop a **family-centered philosophy**.

ACTIVITY:

Display a large piece of paper. Ask participants to brainstorm the following questions (rules on brainstorming appear in Supplemental Materials).

1) What do you currently do to deliver services?

Write these responses in the center of the page and draw a circle around these.

2) What changes do you think occur in a **family-centered approach**?

The FACILITATOR may want to elicit more comments by asking specific questions, such as, "What changes in terms of assessment?" or "in terms of developing outcomes or strategies?" or " in terms of your job roles?" Write these comments around the outside of the circle. Draw another circle around these.

Summarize by showing that the core doesn't necessarily change. Use the participants' specific points and demonstrate how their roles or options for service delivery may expand. Continue the discussion until participants have explored implications of a **family-centered approach** for themselves and their agency.

Ask participants to make decisions about writing a **family-centered philosophy**. If all easily agree, decide on how and when they would like to develop **family-centered philosophy** statements.

NOTE: Participants may need time to absorb the implications of developing a philosophy within their agency. If this needs more discussion, ask participants to schedule another time to meet with or without the FACILITATOR.

If the participants plan to continue save the large sheet of paper from the brainstorming session. It will be used in Objective 7.

OPTIONAL ACTIVITIES FOR DEVELOPING A FAMILY-CENTERED AGENCY PHILOSOPHY

OBJECTIVE 7

To develop a framework for a **family-centered** philosophy.

The FACILITATOR asks the participants to Brainstorm (rules for controlled Brainstorming are int he Training Materials section) several aspects of the family-centered philosophy they feel are important to their agency. The **HANDOUT: Mission for a Family-Centered Philosophy** may be used as a guideline. List the ideas on a large piece of paper.

Next, ask the participants to brainstorm the changes they perceive will be necessary for the agency to shift to a family-centered philosophy. Divide the participant into groups of five or six people and ask each group to discuss the ideas from both brainstorming sessions (see Objective 6). As et of statements that could be used as guidelines should be developed that take into account the feasibility that the agency can conduct practices congruent with the family-centered philosophy. After an appropriate amount of time, ask the small groups to stop and to share their results with the group at large.

Next, ask the participants to identify four or five staff members (one from each small group would be preferable) several parents and an administrative representative who will form a committee to refine and collapse the small group ideas into a final draft of guidelines. The draft should be distributed to all staff members and parents for final comment, then be revised and sent to appropriate administrative or board members for approval.

OBJECTIVE 8

To develop a set of forms reflecting a **family-centered approach**.

ACTIVITY:

Organize a work session with staff and parents form the agency. Ask participants to bring samples of all the forms they use for early intervention services.

Ask participants to order the set of forms beginning with Initial Contact and ending with Exit.

Go through the forms. Analyze and change the wording as needed, to reflect a match between the guidelines developed in Objective 7 and the forms.

NOTE: If the group is large, divide them into smaller groups of about 5 people and divide the set of forms among the groups.

Tell participants to write down any questions that arise concerning the use of particular forms or the order in which the forms should be used. Other questions may arise regarding the whole process the agency uses. The FACILITATOR should be prepared to guide the group in making decisions related to changes the participants may want to see occur within their agency.

POINT: Create a thread from the daily activities to the stated philosophical needs.

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See Chapter Six - Developing the IFSP: Outcomes, Strategies, Activities and Services, (Johnson, B.H., McGonigel, M.J., & Kaufmann, 1988)

Building a Family-Centered Agency

Rules for Controlled Brainstorming

Q-sort Instructions (Kroth, R.L. & Krehbiel, R., 1982 and Project AIM, 9182)

SECTION V:

BUILDING A FAMILY-CENTERED AGENCY

- The IFSP Process
- Developing a Family-Centered Philosophy

Handouts:

Summary of Information
Categories
Major Questions
Sample Family Goals
Ecological Mapping (Dunst, 1985)
Agency A...
Mission of A Family-Centered Agency
Q-Sort playing cards and form board (Kroth, R.L. & Krehbiel, R., 1982 and Project AIM, 1982)

A SUMMARY OF INFORMATION CONCERNING FAMILY OUTCOMES

The following material is summarized from BAILEY, WINTON, & ROUSE (1988). The article is entitled "Family Goals in Infant Intervention: Analysis and Issues" and is available from the authors through the Frank Porter Graham Child Development Center, University of North Carolina, Chapel Hill, NC. It was written prior to the 1989 final guidelines and therefore used the term GOAL. The term OUTCOME has been freely substituted in this summary.

CATEGORIES OF OUTCOMES:

1. Child-based intervention/services
2. Medical/diagnostic information services
3. Respite
4. Support/counseling
5. Basic needs
6. Program participation/service coordination
7. Family enrichment

LEVELS OF FAMILY OUTCOMES:

- Level I - Knowledge/Information (that is, an outcome is written for the family member to gain specific knowledge or information but not to use the information in any specific way.)

- Level II - Direct Use/Application (An outcome involves the application or use of knowledge in a specific or well-defined context).

- Level III - General use/problem solving (The outcome involves a generalized application of a skill across several settings or the goal encourages independent problem-solving by one or more family members).

TIME SPECIFICATION:

Single-action outcome: One that can be accomplished with a specific action, such as getting an eye exam.

On-going outcome: One that involves multiple and extended activities such as participation in a support group or implementation of a home-based instructional program.

CATEGORIES OF OUTCOMES

1) Child-based interventions/service: Any outcome in which the family uses or obtains information about services or intervention activities for their handicapped child. Services refer exclusively to educational or therapeutic activities designed to enhance development (e.g., home-based instructional programs, behavior management classes, physical therapy).

2) Medical/diagnostic information or services: Any outcome in which the family obtains or uses diagnostic information or medical services, including nutrition.

3) Respite: Any outcome in which the family obtains information about or uses in-home or out-of-home care for their handicapped child. Respite refers to services intended to provide relief from caretaking (e.g., babysitting, weekend respite) and not educational services (e.g., developmental day care).

4) Support/counseling: Any outcome designed to provide or increase social support to the family or a family member (e.g., support groups, counseling, advocacy).

5) Basic needs: Any outcome in which the family obtains information about or uses support to meet basic needs such as transportation, finances, food, shelter, clothing, or safety.

6) Program participation/service coordination: Any outcome designed to increase family participation in a program or to enhance parent-program cooperation.

7) Family enrichment: Any outcome designed to enhance the growth or development of the family unit or individual family member other than the handicapped child, or to improve the quality of family relationships.

Summarized from Bailey, D.B., Winton, P.J., and Rouse, L. (1988). Family outcomes in infant intervention: Analysis and issues (Table I). Unpublished Manuscript, retitled by Project Ta-kós.

MAJOR QUESTIONS REGARDING FAMILY OUTCOMES

1. What is the nature of family outcomes and must family outcomes be included in the IFSP for early intervention to be truly family focused?

   There are two types of family outcomes. The first is PROXIMAL. An example is where the parent learns to teach the child a specific skill. The other is DISTAL. Attending parent support groups would be an example.

   "Certainly interventionist should not be expected to intervene directly in all potential areas of family need; however, to be able to help families identify their own needs and facilitate their efforts to locate appropriate resources seems essential." (p. 15-16).

   ". . . it is our belief that the best approach to take is one that will cause the least harm or conflict. The answer ultimately will depend on family preferences." (p. 14).

2. How should meaningful and useful statements regarding family strengths be incorporated into the IFSP?

   Bailey, et. al. (l989) recommend that strengths and resources be incorporated into the action plan. Family functional style (or life style) can also be considered when initiating effective intervention.

3. To what extent should family outcomes contain specific statements about the conditions and criteria for outcome attainment?

   Decisions should be made by individual teams. Examples of formats that require less specificity with respect to criteria for goal attainment are offered by Head Start and Dunst. A format requiring more specificity is the Goal Attainment Scale suggested by Bailey, et. al (l989).

4. How important is it for the IFSP to include "higher-level" family outcomes?

   "There is nothing inherently wrong in single-action or basic knowledge level outcomes. Such outcomes, however, do not necessarily facilitate family independence in decision making or empowerment . . . A sample set of family outcomes written using the taxonomy suggested by Bloom, et. al. (1956). (The taxonomy is attached).

Summarized from Bailey, Winton, & Rouse (l988), by Project Ta-kós

TABLE 11.1

Sample Family Goals Based on Bloom's Taxonomy

Level	Definition	Example 1 Parent Teaching Skills	Example 2 Parent Involvement in Transition	Example 3 Parent Use of Respite
Knowledge	Memorizes and repeats information presented	Memorizes and performs 10-step instructional sequence for teaching spoon feeding, 90% accuracy	Visits one potential preschool placement and gathers five pieces of information as recommended by interventionist	Knows name and phone number of one agency that provides respite services
Comprehension	Demonstrates understanding well enough to paraphrase information or state it in another form	Describes, in own words, teaching sequence and rationale for each step.	Describes importance of planning for transitions	Describes process for qualifying for and securing respite services
Application	Uses information, method, rule, or principle in new but similar situations	Uses at home skills in teaching spoon feeding, with accuracy and without reminders, at least one time per day.	Without prompting, visits additional potential placement sites and gathers essential information	Contacts respite agencies and private sitters to determine availability, costs, and basic competencies
Analysis	Identifies components of a problem	When faced with the need to teach a new skill, can independently break skill down into its components	Observes in placement option to determine skills that appear to be expected of children	Identifies aspects of respite options that corresponds to predetermined criteria for acceptability
Synthesis	Generates new solutions to a problem	If a given instructional strategy does not work, generates and attempts a new strategy	Generates new questions that need to be answered to decide among placement options	If one respite option is not satisfactory, independently generates new options and explores their feasibility
Evaluation	Decides whether a given strategy or solution meets specified criteria, or compares two alternative strategies, solutions, or decisions	When presented two options for teaching a skill, decides which option would be better.	Independently evaluates placement options and identifies placement that will best meet both child and family needs	Selects among alternative respite options and uses most acceptable option

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To appear in

Bailey, D.B., (in press). Considerations in developing family goals. In D. Bailey & R.J. Simeonsson (Eds.), Family assessment in early intervention. Columbus, OH: Charles Merrill Publishers.

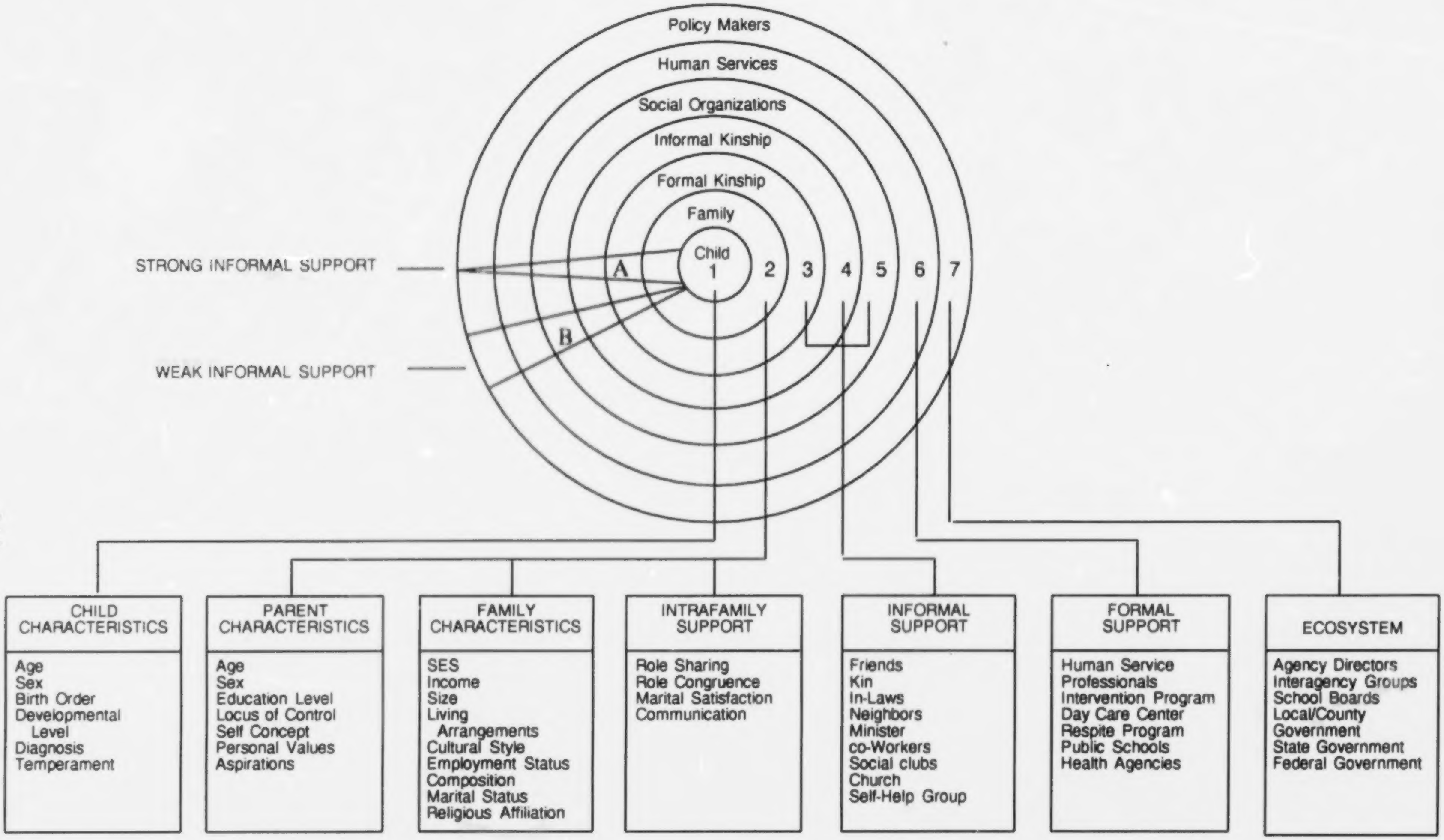
Policy Makers
Human Services
Social Organizations
Informal Kinship
Formal Kinship
Family
Child
1
2
3
4
5
6
7
A
B
STRONG INFORMAL SUPPORT
WEAK INFORMAL SUPPORT
CHILD CHARACTERISTICS
Age
Sex
Birth Order
Developmental Level
Diagnosis
Temperament
PARENT CHARACTERISTICS
Age
Sex
Education Level
Locus of Control
Self Concept
Personal Values
Aspirations
FAMILY CHARACTERISTICS
SES
Income
Size
Living Arrangements
Cultural Style
Employment Status
Composition
Marital Status
Religious Affiliation
INTRAFAMILY SUPPORT
Role Sharing
Role Congruence
Marital Satisfaction
Communication
INFORMAL SUPPORT
Friends
Kin
In-Laws
Neighbors
Minister
co-Workers
Social clubs
Church
Self-Help Group
FORMAL SUPPORT
Human Service Professionals
Intervention Program
Day Care Center
Respite Program
Public Schools
Health Agencies
ECOSYSTEM
Agency Directors
Interagency Groups
School Boards
Local/County Government
State Government
Federal Government

Figure 1.1 An ecological mapping depicting various sources of support to families with a handicapped child (from Dunst), 1985).

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AGENCY A ...

"Agency A may recommend a genetic evaluation . . . by Agency B, which is in another town . . . Agency A may fail to coordinate the appointment (seeing that as the family's responsibility), fail to arrange for defraying the cost (Agency C has the money for such evaluations), fail to understand the implications of travel for the family (Agency D is responsible for travel expenses while Agency E is the only group that can provide respite care for the family's other children), and fail to share the resulting information with other agencies (since Agency B did the evaluation, it's B's responsibility). What seemed like a simple, reasonable recommendation from A's point of view can become an enormous undertaking for the family i A does not follow through."

Duffy, S., 1984 (from Shelton, T.L., Jeppson, E.S., and Johnson, B.H., 1987)

FAMILY-CENTERED APPROACH TO EARLY CHILDHOOD SPECIAL EDUCATION

The **MISSION** of a Family-Centered Approach is to:

Recognize that the family plays a constant role throughout the child's life (and that service providers are more transitory in the child's life).

Recognize each family's informal and formal network of support (ecosystem).

Recognize that educational and medical professionals are part of the family's formal support network.

Support, not supplant, parents in their primary roles as parents.

Compliment traditional family resources and respect unique family functional styles and strengths.

Recognize that each family may interact differently, but not necessarily dysfunctionally, as a result of their child's disabilities.

Strengthen families.

Promote collaboration through informed partnerships, allowing professionals to share their expertise, and parents to remain the true experts on their children with special needs.

Provide training in effective communication skills and empathy for all members of the staff.

Recognize the ways beliefs and values influence the interaction between staff members and families.

Allow parents and families to participate in their child's program depending on each family's level of readiness.

Protect the family against unwarranted intrusion into family life.

Recognize the importance of maximizing each child's potential in daily life environments and situations.

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Q-SORT PLAYING CARDS

child should be taught with family traditions	staff uses interview skills	parent training	family attend regular meetings	child receives individual therapy	child happiness	children make friends
collaboration among service providers	provides home program	parent involvement	flexible scheduling	self concept	collaboration with family	parents as case managers
parents make program decisions	addressing sibling concerns	inservice training	parents as teacher of child	cognitive gains	family values	family attend team meetings
parents generate goals	therapy integrated in daily routine	assessment	grandparent concerns	professionals as primary interventionists		

There is one extra playing card.

Q-SORT

Project Ta-kós [takos] n. (from a Coast Salish Indian term which suggests that any decision or course of action will affect seven generations) 1. a family-centered curriculum for persons living or working with young children who are developmentally disabled. 2. an in-service training model utilizing the curriculum, designed to impact present and future attitudes and actions.

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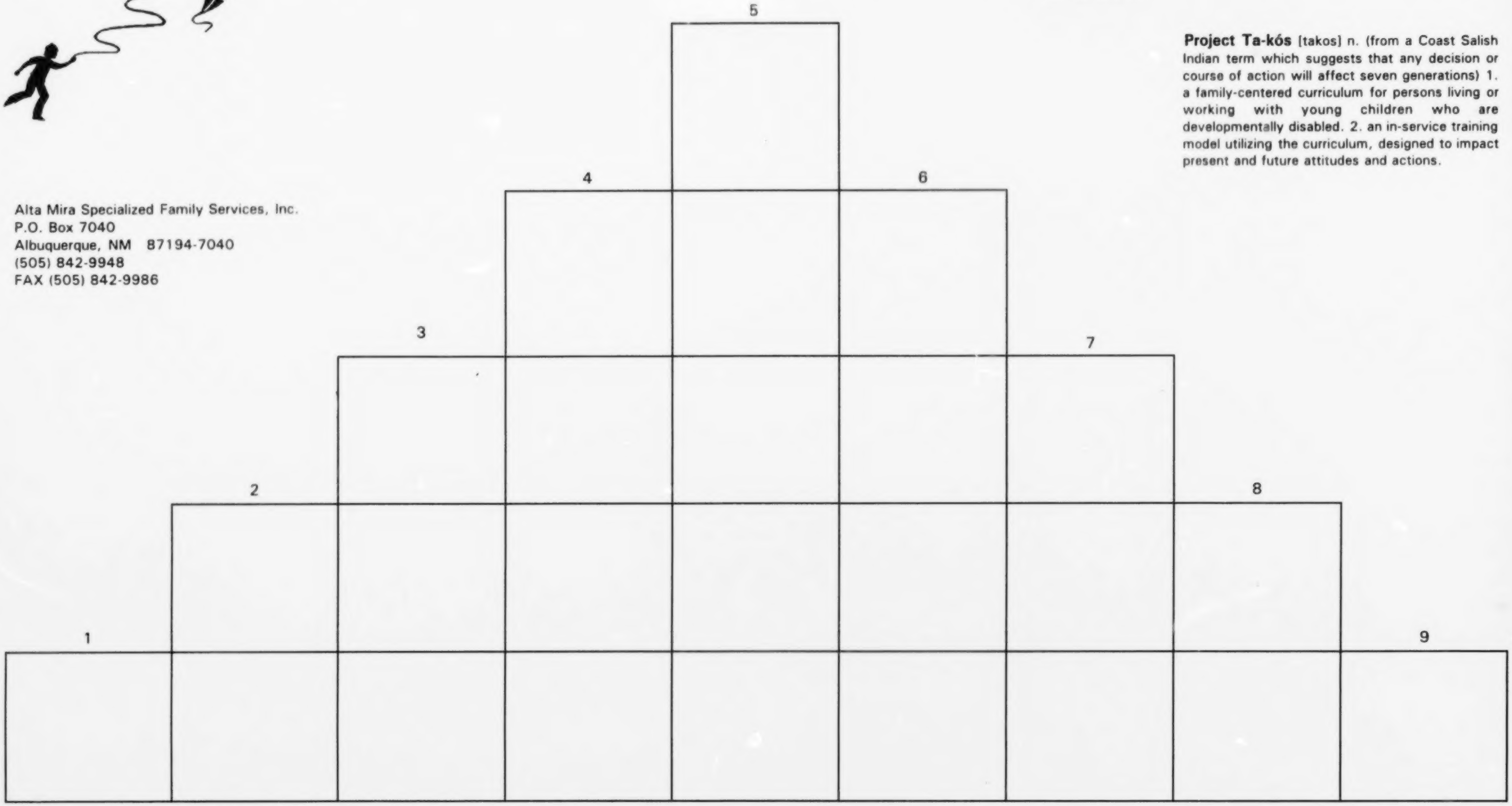

MOST LIKE FAMILY-CENTERED

MOST LIKE CHILD-CENTERED

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SECTION V:

BUILDING A FAMILY-CENTERED AGENCY

- The IFSP Process
- Developing a Family-Centered Philosophy

Overheads:

Key
Child's Present Levels
It is Our Belief
Certainly Interventionists
Major Outcomes
Name of Case Manger
To the extent...
A Philosophy Provides...
Touring Bike
Ecological Mapping

KEY

1. CHILD DEVELOPMENT LEVELS
2. FAMILY STRENGTHS / NEEDS
3. MAJOR OUTCOMES
4. SPECIFIC SERVICES
5. PROJECTED DATES
6. TRANSITION PLAN
7. EVIDENCE OF INTERDISCIPLINARY TEAM

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A statement of the child's present levels of physical development, cognitive development, language and speech development, psychosocial development, and self-help skills, based on objective criteria.

Federal Register / vol. 52, 1987, #303.69 (a)

. . . it is our belief that the best approach to take is the one that will cause the least harm or conflict. The answer will ultimately depend on family preference.

Bailey, Winton & Rouse

Certainly interventionists should not be expected to intervene directly in all potential areas of family need; however, to be able to help families identify their own needs and facilitate their efforts to locate appropriate resources seems essential.

Bailey, Winton, & Rouse (1988)

- An outcome is a statement of the changes family members want to see for their child or themselves.

- It must be functionally stated in terms of what is expected to occur & what is expected as result of actions

- It is important to use the family's language

from GUIDELINES & RECOMMENDED PRACTICES FOR THE IFSP (Johnson, McGonigel, & Kaufmann, 1989)

"The name of the case manager from the profession most immediately relevant to the child's or family's needs, who will be responsible for the implementation of the IFSP and coordination with other agencies and persons. . ."

Federal Register, #303.69 (f)

"To the extent that others make decisions for a family which the family feels obligated to follow, a personal sense of helplessness (lack of personal efficacy) is likely to be fostered."

Carl Dunst (1985)

A PHILOSOPHY PROVIDES A FOUNDATION FOR INTERPERSONAL RELATIONSHIPS AND ACTIONS FOR A PROGRAM.

IT AFFECTS HIRING PRACTICES, EVERYDAY COMMUNICATION AND INTERVENTION, EVALUATION, MONITORING, SCHEDULING, ROUTINES, AND PLANS FOR CHILDREN AND FAMILIES.

WITHOUT A PHILOSOPHY A PROGRAM LACKS COHERENCE, ADAPTABILITY AND COHESION.

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A SYSTEM IS LIKE A TOURING BIKE

"...at any given time, one gear plays a more important role, but it is still the particular alignment among all gears that generates momentum, speed, energy, and power."

(Dunst, Trivette, Deal, 1988)

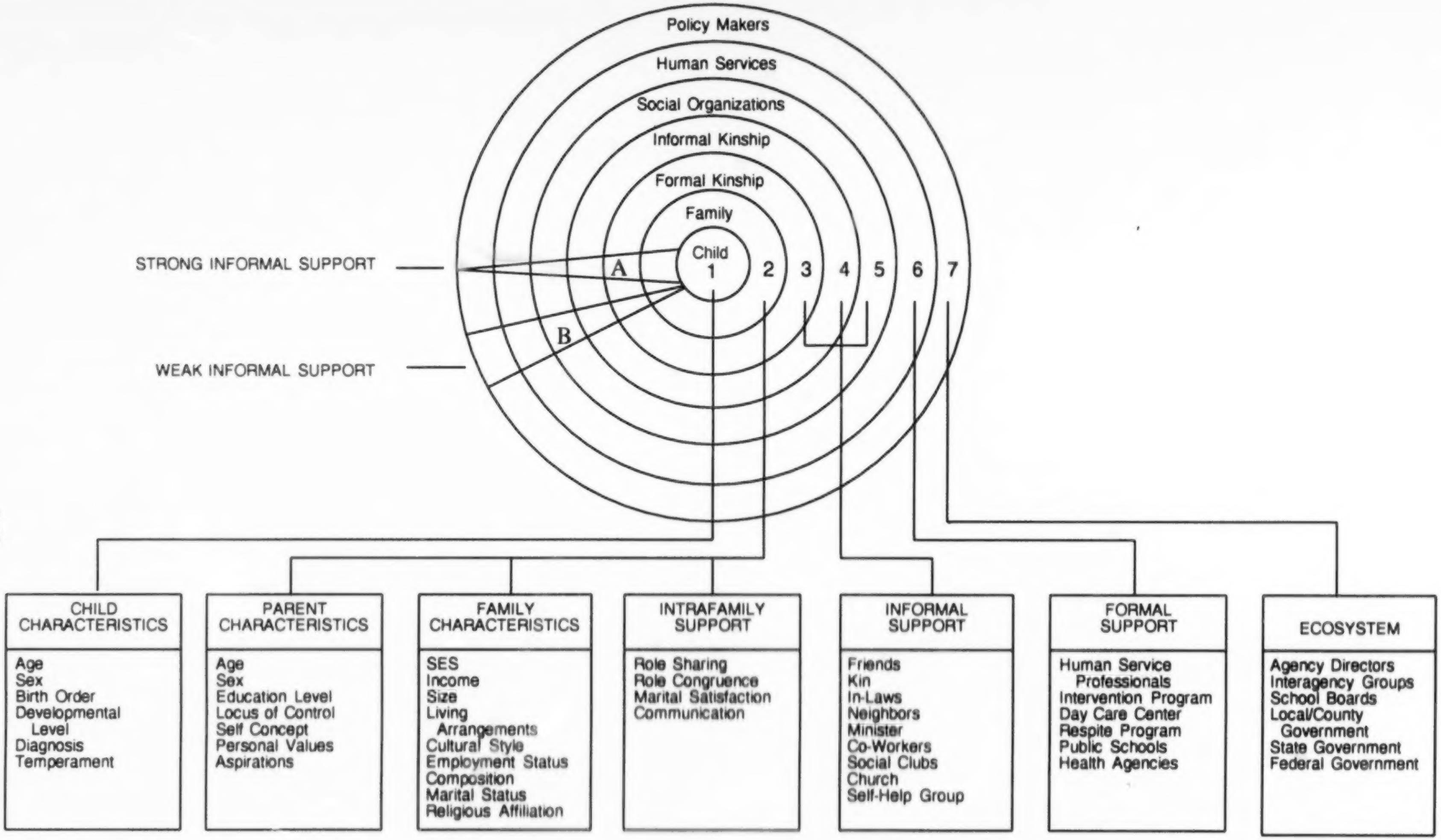
Policy Makers
Human Services
Social Organizations
Informal Kinship
Formal Kinship
Family
Child
1
2
3
4
5
6
7
A
B
STRONG INFORMAL SUPPORT
WEAK INFORMAL SUPPORT
CHILD CHARACTERISTICS
Age
Sex
Birth Order
Developmental Level
Diagnosis
Temperament
PARENT CHARACTERISTICS
Age
Sex
Education Level
Locus of Control
Self Concept
Personal Values
Aspirations
FAMILY CHARACTERISTICS
SES
Income
Size
Living Arrangements
Cultural Style
Employment Status
Composition
Marital Status
Religious Affiliation
INTRAFAMILY SUPPORT
Role Sharing
Role Congruence
Marital Satisfaction
Communication
INFORMAL SUPPORT
Friends
Kin
In-Laws
Neighbors
Minister
Co-Workers
Social Clubs
Church
Self-Help Group
FORMAL SUPPORT
Human Service Professionals
Intervention Program
Day Care Center
Respite Program
Public Schools
Health Agencies
ECOSYSTEM
Agency Directors
Interagency Groups
School Boards
Local/County Government
State Government
Federal Government

Figure 1.1 An ecological mapping depicting various sources of support to families with a handicapped child (from Dunst), 1985).

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SECTION V:

BUILDING A FAMILY-CENTERED AGENCY

- The IFSP Process
- Developing a Family-Centered Philosophy

Supplemental Materials:

See Federal Register (1989), Vol. 54, No. 119, p. 233 - 246

See Developing The IFSP: Outcomes, Strategies, Activities, and Services; Johnson, B.H., McGonigel, M.J. & Kaufmann, R.K., (1989) GUIDELINES & RECOMMENDED PRACTICES FOR THE INDIVIDUALIZED FAMILY SERVICE PLAN, PP. 41-49

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RULES OF CONTROLLED BRAINSTORMING

1. GIVE A STRICT SUBJECT DEFINITION
2. ESTABLISH A TIME LIMIT
3. CRAZINESS IS ENCOURAGED
4. PIGGYBACKING IS ENCOURAGED
5. QUANTITY IS VALUED OVER QUALITY
6. NEGATIVE FEEDBACK IS NOT ALLOWED
7. POSITIVE FEEDBACK IS NOT ALLOWED
8. NO EXPLANATIONS DURING THE BRAINSTORMING SESSION - RESERVE TIME FOR EXPLANATIONS LATER
9. PROVIDE SOME VISUAL FEEDBACK TO THE GROUP (CHALKBOARD, OVERHEAD, ETC.)
10. RECORD WHAT IS HAPPENING ON AUDIO TAPE FOR LATER TRANSCRIPTION

Author Unknown

Q-SORT INSTRUCTIONS

What is a **Q-Sort**?

A **Q-Sort** is a method of measurement. The format requires the participant to place self-referent items on a form board. There are an equal number of items and squares in which to place them; therefore, a forced-choice is involved. This format can be adapted to fill many purposes.

Equipment for each participant

1. The **Q-Sort Form Board**.
2. Twenty five "playing cards" with words printed on them that relate to the subject. These should be cut out.

How many can participate?

One or more.

Directions

1. Place the form board in front of you. There are twenty-five squares in which to place playing cards. Each vertical row is labeled at the bottom. The labels going from left to right are "applies only to child-centered approach" through "applies only to family-centered approach." There are varying degrees of application in the middle squares. The vertical rows are numbered for a visual aid.
2. Look at each playing card. Many of the items printed on the cards will be more characteristic of early childhood education or special education. Some of the items could go in either category. Place each playing card in a square in the vertical row according to which category you feel it most characterizes. Although some items will be difficult to categorize, only one playing card can be placed on each square. All the squares will be filled at the end of this exercise.
3. If there is only one participant, think about why you chose certain items to categorize in a particular way. Try to clarify your values, attitudes, and philosophy about special education and early childhood education.

If there is a group, discuss the similarities and differences between child-centered and family-centered approaches, as well as the values, attitudes and philosophy that went behind choosing certain items for a particular category.

Adapted from Kroth (1972) and Project AIM, (1982)

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